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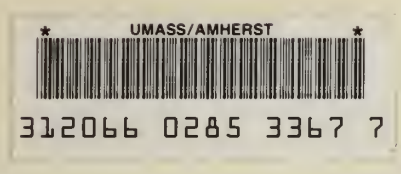

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A MANUAL FOR TOWN CLERKS IN THE COMMONWEALTH OF MASSACHUSETTS

VOLUME I

VITAL RECORDS: BIRTHS, DEATHS AND MARRIAGES

Written by

Massachusetts Town Clerks' Association

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For true and accurate public records

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TABLE OF CONTENTS

	Page
LIST OF FORMS	v
FOREWORD	vii
ACKNOWLEDGEMENTS	xi
CHAPTER 1: INTRODUCTION	1
CHAPTER 2: BIRTHS	7
Standard Certificate of Live Birth	7
Delayed Return of Birth	17
Affidavit and Correction of a Record of Birth	21
Permanent Records	29
Reporting Information	32
Preparing a Certified Copy of a Birth Record	35
Penalties on Clerks	38
CHAPTER 3: DEATHS	55
Certificate of Death	55
Delayed Return of Death	63
Affidavit and Correction of a Record of Death	67
Permanent Records	70
Reporting Information	73
Preparing A Certified Copy of a Death Record	78
Burial Permits	80
Exhuming and Moving a Body Previously Buried	88
Penalties on Clerks	89
CHAPTER 4: MARRIAGES	107
Notice of Intention of Marriage	107
Medical Certificates	111
Certificate of Marriage	113
Delayed Record of Marriage	118
Affidavit and Correction of a Marriage Record	122
Permanent Records	125
Returns to the State Registrar of Vital Records and Statistics	129
Preparing a Certified Copy of a Marriage Record	133
Validity of Marriages	136
Penalties	138

TABLE OF CONTENTS (Continued)

		Page
APPENDIX A:	Reviewing A Certificate of Live Birth	157
APPENDIX B:	Reviewing a Certificate of Death	163
APPENDIX C:	Notice of Intention of Marriage	169
	Solemnization of Marriages	174
	Chart for Calculating Expiration Date of Marriage Licenses	178
INDEX	. . . . .	179

LIST OF FORMS

		Page
R-3	Standard Certificate of Live Birth	39
R-3	Standard Certificate of Live Birth (impounded)	40
R-3-S	Supplemental Report for the Addition of Given Name to Birth Record	41
R-4	Record of Birth Outside of Commonwealth (buff)	42
R-5	Delayed Return of Birth (pink)	43
R-6	Copy of Certificate of Live Birth (pink)	44
R-7	Affidavit and Correction of a Record of Birth	45
R-8	Copy of Affidavit and Correction of a Record of Birth (pink)	46
R-9	Copy of Delayed Return of Birth (pink)	47
R-327	Report to Registry of Vital Records and Statistics (pink)	48
R-501	Requisition for Blanks	49
	Copy of Record of Birth (long form)	50
	Copy of Record of Birth (amended, long form)	51
	Abstract of Record of Birth: Examples 1 & 2	52
	Example 3	53
	Certified Copy of Impounded Birth Record	54
R-301-R	Standard Certificate of Death	90
R-302-R	Standard Certificate of Death (pink, copy of)	91
R-302	Copy of Certificate of Death (pink)	92
303	Medical Examiner Certificate of Death	93
R-304	Report of Fetal Death	94
R-305	Copy of Medical Examiner's Certificate of Death (pink)	95
R-306-6M	Affidavit and Correction of Record of Death	96
R-301-R	Standard Certificate of Death After Correction	97
R-307	Delayed Return of Death	98
R-308	Record of Death Outside Commonwealth (buff)	99

List of Forms (Continued)

		Page
R-326	Report to Registry of Vital Statistics (yellow)	100
	Certified Copy of Certificate of Death (long form)	101
	Certified Copy of Certificate of Death (abstract)	102
R-309	Burial Permit	103
R-309-A	Copy of Official Removal Permit (yellow)	104
	Affidavit for Disposition of Deceased Veteran	105
R-105	Notice of Intention of Marriage	141
R-105	Notice of Intention of Marriage (impounded)	143
PH-V6	Premarital Medical Certificate	145
R-101	Certificate of Marriage	146
R-101	Certificate of Marriage (impounded)	147
R-102	Copy of Certificate of Marriage (pink)	148
R-103	Copy of Certificate of Marriage	148
R-104	Affidavit and Correction of a Record of Marriage	149
R-101	Certificate of Marriage (corrected)	150
R-106	Delayed Record of Marriage	151
R-107	Record of Marriage Outside of Commonwealth	152
R-329	Annual Report to Registrar of Vital Records - Notices of Intention of Marriage	153
	Certified Copy of Record of Marriage (long form)	154
	Certified Copy of Record of Marriage (abstract)	155
	Petition for Authority to Solemnize Marriage in Commonwealth	177
	Chart for Calculating Expiration of Marriage License	178

FOREWORD

This manual on vital records, the first in a series of three volumes covering a town clerk's duties, has been a long time in process. The work started in 1972 when Edward C. Kloza, then state registrar of vital records, requested that the Massachusetts Town Clerks' Association and the Massachusetts City Clerks' Association appoint some of their members to work with him on the preparation of a vitals manual. Mr. Kloza announced in the February 1973 issue of the "Public Recorder" that the committee had had its first meeting on January 11th of that year. He stated that he hoped the work would "serve as a vehicle which will bring uniformity in the interpretation by all clerks of the laws relating to vital records..."

The first committee, consisting of John P. Dalis of Chelsea, Paul E. Healy of Cambridge, and Joseph F. McChristal of Revere representing the city clerks, and Betty J. Brown of Marblehead and Betsey M. Powers of Sudbury representing the town clerks, met with Mr. Kloza at intervals for about one year during which time work was done on marriage and birth records. Unfortunately, Mr. Kloza's health prevented him from continuing the work and the committee effort was in effect abandoned in 1974.

The concept of a town clerks' manual was revitalized in June 1977 and was expanded to cover all aspects of the job. The first meeting of clerks interested in working on the project was held the following October. From this meeting, the present vitals subcommittee was formed and their work, done over the past four years, led to the publication of this vitals manual.

Betsey M. Powers, Editor
Town Clerk of Sudbury

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ACKNOWLEDGEMENTS

The vitals subcommittee of the town clerks' manual committee expresses its appreciation to those who have given much time and effort to making this publication possible.

While Edward C. Kloza is no longer with us, his valuable contribution in laying the groundwork and in providing the initial inspiration for this task must be recognized. The committee has drawn heavily on the many excellent articles Mr. Kloza wrote for the "Public Recorder" during his tenure as state registrar.

Herbert Risser, the former state registrar of vital records and statistics, deserves our gratitude. He has not only written many articles for the "Public Recorder" which we have used extensively in the preparation of this manual, but he has given many hours of his time to a review of the text and has helped significantly in its drafting. His valuable suggestions made during the several conferences held in the summer of 1980 are greatly appreciated.

We are extremely grateful to "Sis" Bernatonis, administrative assistant to the state registrar, for the many hours she devoted to the task of preparing this manual. Her careful review of the manual draft, her practical suggestions and her explanations of procedures have been invaluable.

Two publications, one from the state secretary's office and one from the Department of Public Health, were used extensively in the preparation of this manual with much of the text being incorporated. These publications are "Guidelines for Hospital Personnel, Relative to Preparing Revised Standard Certificate of Live Birth," and "Death Registration Handbook."

We acknowledge the valuable assistance of the staff at the Institute for Governmental Services at the University of Massachusetts in the editing and printing of the Town Clerks' Manual.

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1
INTRODUCTION

Massachusetts has long placed a value on the recording of births, deaths, and marriages.

As early as 1639, the General Court of the Massachusetts Bay Colony enacted a law requiring:

> that there be records kept of all wills, administrations and inventories, and also of the days of every marriage, birth, and death of every person within this jurisdiction.

There was no provision made concerning who was to inform the recorder of these events, but whoever the person was, he was required to pay the recorder one penny.

Concern for the proper recording of births, deaths, and marriages was again expressed by the General Court in 1642 after it "...observed that birthes, deaths & marriages are much neglected in many townes..." At that time, the General Court

> ...ordered, that hereafter the clarkes of the writtes in several towns shall take especially care to record all birthes & deathes of persons in their towns; & for every birth & death they so record they are to have allowed them the sum of 3^{d} [pence], & are to deliver in yearely to the recorder of the Co^{r}t belonging to the jurisdiction where they live a transcript thereof, togeather wth so many pence as there are births & deaths recorded...

This law also provided for a penalty of 20 shillings for every neglect and ordered the clerks to

> ...do their utmost indeavo^{r} to find out in their severall townes who hath bene borne, & who hath died, since the first founding of their townes, & to record the same as aforesaid.

Under the 1642 law, the magistrates and other persons appointed to marry were required to "yearely deliver to the recorder of that Co^{r}t that is nearest to the place of their habitation" the names of the persons they have married and the dates of marriage.

The recorders of the courts were required to "inrolle such birthes, deathes & marriages as shall thus be committed to their trust."

If you are the clerk of one of the older towns in Massachusetts, it is very likely that at least some of the births, deaths, and marriages of your town's early residents are recorded at the county court under the 1642 law. Some of these court records will probably be duplicated in your town records. However, others may have been recorded only at the court.

It is also likely that you will find a town meeting vote which resulted from the 1642 action of the General Court requiring that the town clerk search out the information on births, deaths, and marriages in the town "since its settlement" and possibly appropriating money to provide a book in which the information was to be recorded.

In 1643, the General Court stated that the "recording of death, birth and marriages is very usefull and necessary and yet it hath bene in many places much neglected." The General Court ordered

> ...that all parents, masters of servants, executors, & administrators respectively shall stand charged to bring into the clarks of writs the names of such, belonging to them...as shall either bee borne or dye, & that the newe married man shall stand likewise bound to bring in a certificate of his marriage, under the hand of that magistrate which married him, to the clarke of the writts...

If the information was brought in within one month, the fee for recording was 6 pence. However, the fee increased with each month's delay so that after three months, the fee was 5 shillings.

A 1657 law required that births, deaths, and marriages be reported to the "clarke of writts in eache town" within one month of the event and the clerk was required to report these events within 30 days to the county court.

Further minor changes in the time limit and fees for reporting vital events and the fees for issuing copies of the records were made over the next several decades.

In 1692/3, the General Court passed "An Act for the Registering of Births and Deaths," the preamble of which stated as its purpose the following: "For preventing of great incertainty and inconvenience that may happen for want of a particular register of births and deaths."

This law required that every town clerk

> ...take account of all persons that shall be born or shall dye, within each town respectively...and fairly to register in a book their names and surnames, and also the names and surnames of their parents, with the time of their birth and death.

The 3 pence fee for recording the event was to be paid by the parents or "others nextly related to or concerned with the party born or dying."

If the parent did not report the event within 30 days, a fine of 5 shillings could be charged and could "...be levied by distress and sale of the offender's goods by warrant from [a] justice" if necessary.

In addition, the 1692 law specified that the town clerk give forth from "the registry a fair certificate" to any who desired the same and charge a fee of 6 pence for the copy of the record.

During 1692, a new law relative to marriages was passed by the General Court. This law required that those who wished to marry must have the consent of "those whose immediate care and government they are under," they must have the "banns" published at three public meetings or "by posting up their names and intention at some publick place...," for at least 14 days. They were also required to obtain a certificate from the town clerk or constable that the notice of their intention to be married had been published or posted.

Under this law, every justice or minister who solemnized a marriage had to keep a "particular register" and make a return of each marriage to the clerk of the sessions of peace for the county.

By 1695, the law was changed to require that the justice or minister "shall return a note or certificate to the clerk of the town with the names of all persons which they shall marry."

The certificate issued by the town clerk and returned by the minister was the 17th century equivalent of the modern Form R-101 in use today.

However, it was not until 1842, through the efforts of Dr. Lemuel Shattuck, that the modern vital records registration system was inaugurated in Massachusetts. A special committee was appointed by the General Court to study the existing registration laws and recommend necessary changes.

After due deliberation, the committee reported out a bill which reflected the growing recognition of the usefulness and importance of vital statistics developed from birth, death, and marriage records for improving the effectiveness and practices of public health officials. The bill provided that it was the clerk's duty to record births and deaths, a duty which had existed for the past 200 years. It also required each town to appoint a superintendent of burials and burial grounds who was responsible for reporting deaths to the clerks.

The bill, as originally introduced, did not pass, but was recommited so that it could be redrafted and refiled.

As a result, a new bill was presented to the General Court which was enacted on March 2, 1842. It read as follows:

"AN ACT RELATING TO THE REGISTRY AND RETURNS OF BIRTH, MARRIAGES AND DEATHS

Section 1. The clerks of the several towns and cities in the Commonwealth, shall, annually, in the month of May, transmit to the Secretary of the Commonwealth a certified copy of their record of the Births, Marriages, and Deaths of all persons within their respective towns and cities, which may come to their knowledge; shall state the number of Births and Marriages, and the number of Deaths, with the name, sex, age (and if an adult male, the occupation) and the names of the diseases of which all persons have died, or are supposed to have died, together with the cause or causes of death of all such deceased persons, so far as they may be able to obtain a knowledge of the same from physicians or others; and any Clerk who shall neglect to make such Return, shall be liable to a penalty of $10.00 to be recovered for the use of any town or city where such neglect shall be proved to have existed.

Section 2. The Secretary of the Commonwealth shall prepare and furnish, to the Clerks of the several towns and cities in this Commonwealth, blank forms of returns, as herein before specified, and shall accompany the same with such instructions and explanations as may be necessary and useful; and he shall receive said returns, and prepare therefrom such tabular results as will render them of practical utility, and shall make report thereof annually to the Legislature, and generally shall do whatever may be required to carry into effect the objects of this Act, and of the several provisions of the Revised Statutes not inconsistent with this Act."

Through this law, the central registration office for the filing and recording of birth, marriage, and death records came into being. City and town clerks were required to make annual returns to the secretary of the commonwealth of all vital records filed with them.

The secretary, in turn, was made responsible for preparing tabulations of the numbers, causes, age groups, etc., of deaths; as well as the total number of births and marriages with related statistics for all of these events occurring within the commonwealth. These statistics were presented to the General Court each year.

The initial statistics were quite meager because the information required in reporting these events was minimal. As the importance of these statistics became more apparent, more information was required on the returns. This allowed initial statistical tables to be prepared reflecting a more detailed and accurate picture of the health and growth of Massachusetts.

To obtain the necessary additional information, the forms upon which births, marriages, and deaths had to be reported were revised in 1917.

This was the first major revision in reporting since the inception of the vital statistics registration law. In 1969, the birth certificate was revised extensively and, in 1980, a new death certificate was designed and printed.

With the increased need within the commonwealth for statistical data to be used for health planning and research purposes, the Massachusetts legislature, in 1964, transferred to the commissioner of public health, the responsibility for developing statistical tabulations and the preparation of the annual report on vital statistics. (Chapter 508 of the Acts of 1974)

Since all returns of birth, marriage, and death records were still being made to the state secretary, the same law required the secretary to make these records available to the commissioner as soon as possible so the statistical tables could be prepared. The records were then returned to the secretary who had them indexed, bound, and retained as permanent legal records.

With a cooperative effort between the two state agencies, this arrangement worked for many years but as time passed it became increasingly difficult.

Finally, in 1976, the Massachusetts legislature transferred to the commissioner of public health the remaining responsibilities of the secretary of the commonwealth relative to registration and certification of vital records. (Chapter 486 of the Acts of 1976)

This transfer brought together again under one department head all the state level responsibilities regarding a centralized registration system and the development of essential statistical data. This department head was the commissioner of public health. In addition, the merger eliminated the considerable amount of duplication that had existed as a result of the separation of the registration from the statistical functions.

The new law further established the Registry of Vital Records and Statistics within the Department of Public Health. The commissioner of public health became responsible for the appointment of a state registrar of vital records and statistics who is required to enforce all laws relative to the registry and to the return of vital records and statistics.

Most recently, Chapter 684 of the Acts of 1981, effective as of March 23, 1982, amended the laws relating to births, deaths, and marriages, changing several existing provisions and adding new ones. These amendments have been incorporated into this manual.

In addition, Chapter 684 authorized the Department of Public Health to promulgate regulations "to insure the uniform administration of all laws relative to the registry and return of births, marriages, and deaths." The proposed regulations are to be prepared by a committee consisting of the state registrar of vital records and statistics, not less than four city or town clerks, an historian, and a genealogist. The committee is to meet annually, not later than March first and notice of any public hearings to be held on proposed regulations is required to be sent to all city and

town clerks at least 21 days prior to the hearing. Since the first regulations are not expected to be promulgated until late 1982 or in 1983, reference to them has not yet been included in this manual.

Today, all original records of births, marriages, and deaths are registered at the local level, in the 351 city and town clerk's offices throughout the commonwealth, as they have been for some 300 years. The laws governing the recording of vital records are found in Chapter 46 of the General Laws. Laws governing the solemnization of marriages and the filing of notices of intention of marriage are found in Chapter 207. Other requirements relative to births are found in Chapters 111 and 190 and those relative to deaths are found in Chapters 38 and 114.

At the state level, the Department of Public Health has duplicate copies of all municipal vital records from 1841 to date. Approximately 22,000,000 records are on file in the state registry.

The current central registration system for Massachusetts vital records has depended upon and survived for more than 130 years because of the exceptional cooperation between the city and town clerks, the state secretary's office and, more recently, with the Registry of Vital Records and Statistics.

Together, the local clerks and the state officials have provided for the complete registration of all vital events occurring in the commonwealth and have worked to ensure the collection of accurate and complete data.

BIRTHS

2
BIRTHS

NOTES

I. STANDARD CERTIFICATE OF LIVE BIRTH (Form R-3)

A. GENERAL

A Standard Certificate of Live Birth on Form R-3 is required to be registered, irrespective of the duration of the pregnancy, if the child is born alive. (see sample form, page 39)

1. Facts to be Recorded [46:1]*

The Standard Certificate of Live Birth is a five-part form with interleaved carbon paper. The first three parts contain the following information:

- date, place and time of birth
- name of the child
- sex of the child, single or twin birth, born first or second, etc.
- name, age, and birthplace of each parent
- occupation of the father
- maiden name and residence, including street and number, if any, of the mother
- signature of physician or other attendant
- signature of the mother, or if she is unable to sign, the signature of the father or other responsible adult attesting to the truth of the facts appearing in the report. [46:3A]

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*Throughout this manual many references will be made to the General Laws of the Commonwealth which apply to specific items and where further information may be found. In order to conserve space, the following legend will be used: The first number denotes the chapter of the General Laws and numbers after the colon, the section of that particular chapter. For example: [46:1] means chapter 46, section 1 of the General Laws.

The remaining parts of the form contain, in addition to the above required information, confidential information which is sent directly to the Department of Public Health and is for that department's use only. [111:24B] (see Note:page 56)

B. SOURCES OF INFORMATION

1. Physician or Medical Officer

Every physician or hospital medical officer registered under Chapter 112, s. 9 (assistant in medicine) shall keep a record of the birth of every child in cases in which he was in charge, showing the above information required for a birth record. [46:3]

a. birth occurring in a hospital [46:3, 3A]

If a birth occurs in a hospital or if a birth occurs elsewhere and the mother and child are admitted to a hospital immediately after birth for post-natal care, the physician or hospital medical officer shall, within 24 hours after the birth, file a report with the hospital administrator containing all information required by 46:1 to be shown on the record of such birth. [46:3]

The administrator or person in charge of a hospital is also required to obtain this report within 24 hours after the birth or admittance. The administrator is required to have a copy of the report prepared on a Form R-3 which must then be filed within 10 days with the clerk of the city or town in which the birth occurred. [46:3A]

b. births occurring with physician in attendance, but not in a hospital [46:3B]

Every physician attending a birth after which the mother and child are not immediately admitted to a hospital for post-natal care, shall, within 10 days of the birth, file with the clerk of the city or town in which the birth occurred, a report on Form R-3 stating the facts required.

2. Other

a. births occurring without a physician, hospital, medical officer, or other medical person in attendance [46:4]

The mother of a child born without a physician or other medical person in attendance is responsible for filing a report of the birth. The report must be filed

within 30 days after the birth with the clerk of the city or town in which the birth occurred. The report must contain the facts required for a record and be signed and sworn to by the mother. In addition, written evidence substantiating the facts must be furnished. If the clerk is satisfied as to the truth and accuracy of the facts, he shall make a record of the birth.

If the birth occurred within one year of filing the report, Form R-3 should be used. The mother should certify to the facts by signing the form in item 15. The attendant, who may be the father or someone else, should sign in item 14. If there was no attendant, "no attendant" should be entered in item 14.

Written evidence to substantiate the birth may be a notarized statement from a pediatrician who attended the child sometime after birth, a baptismal certificate, or an early insurance policy. A certified copy of the parents' marriage record will substantiate the information relative to the parents and establish a birth as legitimate. (see Appendix A for information on making out a Form R-3)

If, in your opinion, the written evidence is not satisfactory, you must refuse in writing to record the birth. The mother may then present a petition, together with your written refusal and her evidence, to a justice of the probate court for the county in which the birth occurred. The court must notify you of a hearing on the petition. After the hearing, the court may order you to record the birth.

If, however, no written evidence can be obtained, the birth may be recorded on Form R-3 and "recorded under Chapter 46, section 6" should be noted in the margin.

If the birth occurred more than one year prior to the request for recording, Form R-5, Delayed Return of Birth, must be used. (see page 17 for procedure on delayed returns)

b. births occurring on a vessel [46:7]

The master or other commanding officer of a vessel shall give notice, with the facts required for record of every birth occurring among the persons under his charge. Notice of a birth shall be given to the clerk of the town at which his vessel first arrived after the birth.

c. births occurring on an airplane [46:7A]

The captain or other commanding officer of an airplane shall give notice with the facts required for record of every birth occurring among persons under his charge. Said notice shall be given to the clerk of the town at which his airplane first lands after such birth.

Under both b and c above, a form R-5 should be used. The captain should make and swear to the affidavit, having obtained the required information from the mother. Written evidence would be the ship's or airplane's log.

d. parents, householders [46:6]

Parents, within 40 days after the birth of a child, and every householder within 40 days of a birth in his house, shall cause notice thereof to be given to the clerk of the town in which the child is born. Procedures for recording a birth under these circumstances are the same as outlined under paragraph a above.

e. foundlings [46:6]

The commissioner of social services, within 40 days after the delivery or commitment of an abandoned child or foundling to his department, shall cause notice of the birth of such child or foundling to be given to the clerk of the town in which the child or foundling was found. A Form R-5 would be used for this purpose with the commissioner completing and signing the required affidavit on the back of the form and noting whatever evidence he may have.

C. PENALTIES

1. On Hospital Administrators

For not obtaining, within 24 hours of a birth in a hospital or admittance thereto by the mother and child for post-natal care, a report required by section 3 and failing to forward a copy to the city or town clerk--a fine of not more than $25.00. [46:3A]

2. On Physicians and Hospital Medical Officers

For not treating the eyes of a child whose birth he attended, within two hours after birth--fine of not more than $100.00. [111:109A]

For failing to give notice to the board of health if either eye of an infant whom or whose mother he visits, has become inflamed, swollen and red, etc., within two weeks after birth--fine of not less than $50.00 nor more than $200.00. [111:111]

3. On Others

A parent, keeper, superintendent, or other person required by section 6, failing to cause notice of a birth to be given, or the master or commanding officer of a vessel failing to give notice of a birth--fine of not more than $5.00. [46:8]

Whoever willfully makes a false return relative to a birth--fine of not more than $50.00. [46:14]

Nurse, relative or other attendant having charge of an infant who fails to report within 6 hours after either eye has become inflamed, swollen or red, to the board of health--fine of not more than $100.00. [111:110]

Penalty for any of the following is a fine of not more than $500.00, or imprisonment for not more than 6 months in a house of corrections: [46:30]

- Falsely making, altering, forging, counterfeiting a copy of a birth record
- procuring or assisting another to falsely make, forge or counterfeit such a copy
- forging or using without authority the signature, facsimile signature, or validating stamp of a city or town clerk, or the state registrar upon a genuine or falsely made copy
- uttering, publishing as true or in any way making use of a falsely made, altered, forged or counterfeit copy
- using or attempting to use, with intent to defraud or deceive a copy of a record of birth of a person other than himself

D. COMPLETING THE CERTIFICATE OF BIRTH FOR RECORDING

1. Massachusetts Certificates [46:1A, 2A, 4A, 12]

a. town of birth of the child

Each city and town clerk, upon receipt of a return of

a birth in his town, shall determine that it has been completed in accordance with the requirements of 46:3. If the return is complete, he shall record it as required in 46:1. If there are any deficiencies or omissions, he shall contact the physician, hospital administrator or parents, as the case may require, for the necessary clarification, amendment or supplementation or may, if necessary, require the preparation of a new certificate. [46:4A]

Each town clerk shall receive or obtain and record in the record of births the facts relative to births of abandoned children and foundlings found within the limits of his town. The facts relative to births required by 46:1 shall, so far as possible, be set forth except that the town wherein the child was found shall be recorded as the place of birth, and the date recorded as the date of birth shall be that determined by the commissioner of social services. [46:1A]

Since about 98 percent of births occur in hospitals, most of the returns of birth you will receive will have been made out by the hospital staff. However, you may also receive some returns relating to births which occurred in your town but not in a hospital. These will have been made out by the attending physician, or other attendant or by the parent(s). (see pages 8-10)

For all births which occurred in your town, you will receive pages 1, 2 and 3 of Form R-3, regardless of the mother's residence, unless the birth is reported by the mother on Form R-5. (see page 17)

Each return of a birth occurring in your town should be carefully checked to be sure it has been properly completed and that there are no strike-overs or erasures. (see Appendix A for information required on Form R-3)

If, after your review of Form R-3, you find it to be complete and in order, enter the date on which it was received in your office under item 16 and sign it under item 18. You are to keep and record page 1 of Form R-3, forward page 2 to the state registrar, and, if the parents are not residents of your town, forward page 3 to the clerk of the town of residence of the parents. (see pages 13 and 33)

b. <u>supplemental report</u> [Form R-3-S] (see sample form page 41)

If you receive a Form R-3 which does not contain the

given name of the child, the given name may be added by the parents within 20 days after the date on which you receive the Form R-3. The supplemental report can be used only to add the given name or names and the supplementary report form should be sent out only by the clerk of the town in which the birth occurred.

Send a copy of Form R-3-S, Supplemental Report for the Addition of Given Name(s) to the Birth Record, to the parents. Fill out the right hand side, top half showing to whom to return the form, the date on which it should be returned, the city or town, the registered number of the birth record, the date of birth, and the last name of the child. Also, sign the explanatory statement on the left side. When the supplementary report is returned add the given name(s) to the certificate Form R-3, item 2 and enter the date of receipt under item 17. File the report with the certificate to which it relates.

The given name may be added to the Form R-3 if you do not receive the supplemental report from the parents until some time after the 20 day period has expired. However, you should not delay your report to the state registrar while waiting for the supplemental report. Be sure to notify the state registrar of the addition of the name when the supplemental report is received.

c. town of residence of parents

You will also receive and record all birth certificates relating to each child whose mother was a resident of your city or town at the time of birth, if the child was born elsewhere in Massachusetts. [46:12] These certificates will be Form R-3, page 3, clerk of residence copy, and will have been reviewed for completeness and accuracy by the clerk of the town in which the birth occurred. However, you should check to be sure that the mother resides in your town. Note the date of receipt and sign these certificates on the back.

NOTE: *Certificates relating to illegitimate births will not be received by the clerk of the town of the mother's residence unless it is also the town in which the birth occurred since these are impounded records and are not transmitted.* [46:2A, 12]

For all certificates received, Form R-3, page 1 as the clerk of the town of birth and page 3 as the clerk of the town of residence, assign a number and enter it in the space for registered number at the top right of the form. Assign 1 to the first certificate received

relating to a birth which took place in January of a given year. Number each certificate in consecutive order as it is received for each birth which took place from January 1 through December 31 of that year. You may not receive some of the certificates until sometime during the next year. However, number them in order in the year in which the birth occurred.

2. Out-of-State Birth Certificates Received from the Parents [46:1B]

Any resident of the commonwealth who is the parent of a child born outside of the commonwealth may personally present an original or certified copy of the birth certificate to the clerk of the town where the parent was domiciled at the time of the birth. The birth certificate may be used as the required documentary evidence to establish the record of birth in the town of the parent's residence.

If the out-of-state birth certificate is not available, contact the state registrar for advice on what evidence might be substituted.

A Form R-4, Record of Birth Outside Commonwealth, should be used to establish the birth record. Complete the front of the form using the documentary evidence submitted to supply the information. Any missing information can be supplied by the parent. In addition, the back of the form must be completed and contains the affidavit of the parent wishing to establish the record.

File the documentary evidence, or a copy made and attested by you, with the completed Form R-4. (see sample form, page 42)

Proof of residence of the parent at the time of birth must be provided and may be a rent receipt showing residence in your town at the time of the birth, or a record in your office such as the street listing or voter registration for the year of birth. (see back of Form R-4)

Be sure that the parent signs on the back of the form and that you administer the oath and also sign. (see oath, page 20)

Assign a registered number at the top right of Form R-4 and record the birth in the regular order for that year. Also assign a deposition number, which may be a number including the year such as "80-1," "80-2," etc.

3. Out-of-State Birth Certificate Received Directly from an Official

If you receive, directly from the clerk of a city or town outside of the commonwealth, or from an official of another state, a certified copy of a birth record relating to a child whose parents were residents of your town at the time of birth, the birth cannot be recorded unless the procedures outlined in paragraph 2 above are followed.

While it is not required by the General Laws, you may notify the parent(s) that you have received the certificate of birth of their child. If they wish to have the birth recorded, either or both of the parents may execute the required deposition on Form R-4. The out-of-state birth certificate may be used as the required documentary evidence and missing information may be supplied by the parent(s).

NOTE: *Prior to March 23, 1982, the effective date of Chapter 684 of the Acts of 1981, it was possible to record (under 46:12) an out-of-state birth without a deposition, upon receipt of a certified copy of the birth record directly from an out-of-state official. However, Chapter 684 eliminated these provisions from 46:12. You may find out-of-state births among your older records. These records may have been made using the out-of-state certificate only, or using the out-of-state certificates with Form R-6 without a deposition.*

4. Child Born Outside of the Commonwealth Adopted by Massachusetts Residents [46:1B]

The provisions of section 1B outlined in paragraph 2 above, also apply to Massachusetts residents who have adopted a child born outside of the commonwealth. The parents must have been Massachusetts residents at the time of the adoption and the adoption must have taken place in Massachusetts.

The parents must personally present to the clerk of the city or town where the parent was domiciled at the time of adoption, a certified copy of the adoption decree (Massachusetts Form R-891) in addition to a certified copy of the child's birth record. Proof of residence of the parent at the time of adoption is also required and this may be a record in your office such as the street listing or voter registration for the year of adoption.

Birth certificates of alien children adopted by United States citizens and legally admitted to this country are available from the Immigration and Naturalization Service, U.S. Department of Justice, Washington, D.C. If this document is being used as documentary evidence for proof of birth, it is acceptable if it contains either the child's original name or adopted name. (This document is federal Form G-350.)

The documentary evidence used as proof of birth may also be a birth certificate issued by the country of birth. In this case, a notarized translation should accompany the birth certificate. In some foreign countries, such as Korea, the birth certificate is called "Family Registration."

The adoption decree will give the original name of the child which will also appear on the birth certificate so that the two records can be compared to be sure that they both refer to the same child. Also the date and place of birth on the adoption decree should be the same as those items entered on the birth certificate.

Form R-4 should be used to establish the birth record and the information appearing on the adoption decree should be entered on the front of the form. However, items 4, 4a, 8, 12 and 14 on Form R-4 should not be filled in as this information will not appear on the adoption decree, Form R-891. Only the name of the child after adoption should be entered in item 2, not the original name.

Be sure that the back of Form R-4 has been completed. Enter the type of record used to prove residence. Enter both the birth certificate and the certificate of adoption as the evidence to substantiate the affidavit and note the date of the adoption certificate and the court which issued it.

Be sure that the parent has signed the back of the form and that you have administered the oath and also signed. (see oath, page 20)

File the original certified adoption decree (Form R-891) with the Form R-4. Also file the birth certificate, or a copy made and attested by you, with the Form R-4. Assign a deposition number which may be a number including the year such as "80-1", "80-2", etc. Assign a registered number at the top right of the form and record the birth in the regular order for the year in which the birth occurred.

5. Refusal to Accept

If you believe that the documentary evidence submitted is not sufficient to establish a record, as provided in either paragraph 2 or 4 above, give the parent a written refusal to do so. The parent may then petition a judge of the probate court which has jurisdiction over your town. The judge is required to hold a hearing at which the clerk shall have an opportunity to be heard. After the hearing, the judge may order you to receive the documentary evidence as sufficient and to record the birth.

II. DELAYED RETURN OF BIRTH (Form R-5) [46:13A]

A. GENERAL

Form R-5, Delayed Return of Birth, is to be used only in those cases in which the birth was not previously recorded. Ordinarily, this form would be used only in the case in which the original certificate failed, for some reason, to reach the clerk of the town in which the birth occurred or, if a home birth, the mother neglected to report the birth within one year of the event. A Form R-5 should be accepted and recorded only in the town of birth, not in the town of residence of the parents, if different. (see sample form, page 43)

Before proceeding with a Delayed Return of Birth, check with the state registrar's office to determine if the birth has been recorded elsewhere. The person wishing to establish the record may be in error in believing that the birth occurred in your town and has not yet been recorded.

If you find that your town is the town of residence of the parents at the time of birth, rather than the town in which the birth occurred, inform the applicant that a delayed record must be established in the town where the birth occurred and not in your town.

However, if the birth was recorded in the town in which it occurred but you simply have not received a copy of the record, ask the clerk of the town of birth to forward a copy to you. In this case, the delayed return would not be needed as you should receive a copy of the record from the clerk of the town of birth. If the birth occurred prior to 1969, the clerk of the town of birth should send you a copy using Form R-6, Copy of Certificate of Live Birth. If the birth occurred in 1969 or later, the clerk of the town of birth may send you either a certified copy of Form R-3, or use Form R-6.

After you determine that the birth occurred in your town and that the birth has in fact not been previously recorded, proceed with Form R-5, Delayed Return of Birth, which includes an affidavit on the reverse side. Documentary evidence substantiating the facts beyond reasonable doubt must be submitted. If you are satisfied as to the truth and accuracy of the statements in the affidavit and the sufficiency of the evidence submitted, you shall then make a record of the birth. [46:13A]

A certified copy of a written statement made at the time of birth by any person, since deceased, required by law to furnish evidence thereof, may, in your discretion, be made the basis for the record of a birth not previously recorded. [46:13]

B. DOCUMENTARY EVIDENCE

When establishing a Delayed Record of Birth, it must be remembered that the resultant record will be only as good as the evidence upon which it was based. To assure that the record is valid, the suggested documentary evidence which should be required to substantiate the affidavit is as follows:

1. If the Birth Occurred at Home:

First establish that the parents were residents of your city or town at the time of birth using one of the following records:

- street listing for the year of birth
- voter registration record for the year of birth
- assessors' records for the year of birth
- poll tax records for the year of birth

Once the residence of the parents is established, then documentary evidence regarding the birth must be submitted by the applicant and the usual proof would be one of the following:

- an early baptismal certificate or other church or synagogue record
- an early bible record
- a school entrance record
- a United States Census record for the first census taken after the birth

The evidence submitted should be obtained by the applicant.

2. If the Birth Occurred in a Hospital in your Town:

Advise the applicant to obtain a statement from the hospital certifying to the birth. This statement, signed and certified by either the hospital administrator or the records librarian, would constitute the required documentary evidence upon which the delayed record would be based.

The hospital certificate substantiates the fact that the birth occurred in your town so that no proof of residence would be required. The certificate should give the address of the parents at the time of the birth so that, if the parents were Massachusetts residents at the time of the birth, you will know to what town to send a copy of the birth record. (see page 34 for returns to other town clerks)

3. Establishing Own Birth Record

If a person having sufficient evidence to establish a Delayed Record of Birth, has no one older than himself to file the required affidavit, the record may be established under Section 13A of Chapter 46. In such an instance, item 21 on Form R-5 should read "Chapter 46, section 13A." This should be entered on the back of the Form R-5 as well. Item 21 and the affidavit on the back of the form should include the name and address of the person establishing his own birth record, and he should sign the affidavit.

In any event, whether the birth occurred at home or in a hospital, whether there is a deponent or not, you should obtain a certified copy of the parents' marriage record to substantiate the information regarding the parents and to establish the legitimacy status of the child.

For other documentary evidence relating to the various items on the birth record, see page 22, Affidavit and Correction of a Birth Record. Both the front and the back of Form R-5 must be completed and signed and a copy of the Delayed Return of Birth should be sent to the state registrar. (see page 33)

4. Refusal to Accept

If the documentary evidence submitted under paragraphs 1, 2, or 3 above is not satisfactory, you may refuse to establish the record. Give the applicant your refusal in writing. Inform the applicant that he may petition the probate court of the county in which he alleges he was born. After a hearing, at which the clerk shall have the opportunity to be heard, the judge may order the clerk to receive the evidence and record the birth.

C. COMPLETING THE DELAYED RETURN OF BIRTH FOR RECORDING

Enter on the front of Form R-5 in the appropriate items 1 through 19, the information obtained from the documentary evidence submitted. Enter in item 20 the date the form was signed or received in your office. Enter in item 22 the deponent's name, address and relationship to the child whose birth record is being established and enter the name of your town.

Assign a registered number in the regular order along with the standard certificates of live birth for the year in which the birth occurred. Enter this number at the top right of the form in the space provided.

The back of the form must also be completed by entering the county in which your town lies, the name and address of the person establishing the birth record and the name of the child. The types of documents used to establish the residence of the parents and to substantiate the facts must also be entered.

The required affidavit must be signed and sworn to by a parent of the child, some credible person having knowledge of the case, or under certain circumstances (see paragraph 3 above) by the person to whom the record relates.

SAMPLE OATH

Do you solemnly swear that the statement you have signed is true to the best of your knowledge and belief?

You may accept a notarized affidavit if the deponent cannot appear in person in your office provided it is accompanied by sufficient documentary evidence.

You must sign and date the back of the form. Transmit a copy to the state registrar and to the clerk of the town in which the parents resided at the time of birth. (see pages 33 and 34)

FEE: The fee for filing a delayed return of birth is $2.00 [262:34(14)] unless your town meeting has established a different fee.

III. AFFIDAVIT AND CORRECTION OF A RECORD OF BIRTH (Form R-7) [46:13]

A. GENERAL

Form R-7, Affidavit and Correction of a Record of Birth, should be used to correct information contained in, or to add information missing from a birth certificate which has already been recorded. Amendments to a birth record can be made only to reflect the correct information at the time of birth except as provided in paragraphs 6 through 10 of the following section B, Documentary Evidence. (see sample form, page 45)

Before proceeding with an affidavit and correction of a record, check the original certificate on file to be sure that a simple clerical error has not been made. If you find a clerical error, make and initial the appropriate correction noting "clerical error" next to the entry. If the clerical error has also been made in copying the information from an original record onto a copy forwarded to the state registrar, prepare a second copy using the old Form R-3 and transmit it to the state registrar. If you have no copies of the old form R-3, check with the state registrar for proper form to use. If the clerical error was also made on a copy forwarded to another town, make out a second copy using form R-6 and transmit it to the other town. Note in the margin of copies forwarded "clerical error." No affidavit and correction or deposition is necessary in this case.

However, only records of births prior to 1969 are subject to such clerical errors. Records of births which occurred during 1969 or after may be corrected only by affidavit and documentary evidence.

If an individual claims that his birth record is incorrect and you are the clerk of the town of residence of the parents, check with the clerk of the town in which the birth occurred to determine whether or not an error was made in the copy sent to you. If so, ask the clerk to forward you a correct copy. This would relate only to birth records prior to January 1, 1969 at which time the present 3-part form was first used. If an error was not made in forwarding the copy, the individual should be advised to go to the town in which the birth occurred to proceed with the affidavit and correction.

The affidavit and correction can be made only in the town in which the birth occurred. After acceptance and recording of the correction, a copy of Form R-7, completed on both front and back, should be sent to the state registrar. A copy of the affidavit and correction, using pink Form R-8, should be sent to the clerk of the town where the parents resided at the time of the birth. (see page 34)

Form R-7, Affidavit and Correction of a Record of Birth, is to be used for adding missing information or changing information already reported. The required affidavit appears on the back of the form. The affidavit may be given by the physician who attended the birth, a parent, or an older brother or sister, or some other close relative of the person whose record is to be corrected. In the absence of any of these individuals, the person to whom the record relates may act as the deponent to give the required affidavit.

B. DOCUMENTARY EVIDENCE

Acceptable documentary evidence to substantiate the affidavit may be a written record made at the time of birth by a person, since deceased, who was required to furnish information, such as a certified copy of the attending physician's records or a certified copy of the hospital record.

Other acceptable documentary evidence will depend specifically upon what information is to be corrected or supplied. Documents presented should be certified. The following, in order of preference may be accpeted:

1. For adding a given name, or amending a given name already recorded:

   One of the following:

   - baptismal certificate
   - family bible entry
   - school entrance or early school record
   - first U.S. Census record after year of birth
   - other written evidence made at or near the time of birth, such as life insurance policy, bank book, stocks or bonds.

   The document presented should be the one made closest to the date of birth.

2. Spelling of surname: one of the following:

   - parents' marriage record
   - mother's birth record, if amending an illegitimate birth

   If the parents' marriage took place out of the country and a certified copy of the record cannot be obtained, the following evidence may be used:

a. a written statement signed by the deponent that the record of marriage of the parents which took place in [name of country] cannot be obtained

AND

b. two of any of the following listed in their order of preference:

- father's birth record
- street listing or assessor's record for the year of or the year prior to the year of birth showing the correct spelling of the surname of the father
- record of the United States Census taken prior to the year of birth showing the correct spelling of the father's surname
- birth record of an older brother or sister with the correct spelling of the surname

NOTE: *In the event that only one of the items under b. can be obtained, then, in addition, obtain one of the following, listed in order of preference:*

- baptismal certificate
- vaccination record
- early medical record--within three years of birth
- life insurance policy taken out before age three
- school entrance record

This procedure will allow the correction of a surname based upon two documents when the one which is considered to be the most accurate, the marriage record of the parents, is not obtainable.

3. Date of Birth: one of the following:

- hospital record
- if the birth did not occur in a hospital, a doctor's record, baptismal record, or early school record

Under no circumstances can a date of birth be changed to reflect a date after the date the original birth certificate was received in the office of the clerk of the town in which the birth occurred.

4. Color: (appears on records prior to January 1, 1969 only)

Section 3 of Chapter 46 provided that the attending physician determine the color of the child. Therefore, only he may amend that item upon submitting his record to indicate that an error has been made on the original record, or by filing a sworn statement that he was in error when making the original determination. However, if the attending physician is deceased or unable to be located, color may be changed based upon affidavits of two anthropologists who state that the color on the original record is incorrect.

5. Information Relating to the Parents:

- marriage record of the parents
- if the marriage record is not available, then the birth record of the appropriate parent

6. Sex: one of the following:

- hospital record
- doctor's record
- baptismal record
- early school record
- census record
- if the person is now married, a copy of the marriage record

Transexuals: applies only to records of those who have changed sex through an operation. [46:13]

- notarized statement from the physician that the sex reassignment surgery has been completed

and

- notarized statement from the physician that the individual is not of the sex entered on the original birth record

- for a change of name because of change of sex, a legal change of name decree from an appropriate court is required.

7. Amending a Record Because of Adoption [46:13]

A person who has been adopted by judicial decree, or a person so adopted who has had his name legally changed after the adoption to that of his adoptive parents, may have his birth record amended by the clerk of the town in which he was born.

However, the birth record cannot be amended until after the clerk has received a certificate of adoption, a certified copy of the adoption decree, or a certified copy of the legal change of name decree which has been issued either by a probate court of the commonwealth, or by the appropriate court of any other state or country.

If the parents or parent of a child adopted in Massachusetts have indicated on the certificate of adoption that they wish to have the child's birth record amended, you will receive the certificate of adoption directly from the probate court under the provisions of Chapter 210, section 6A. In this case, no affidavit is required and you should proceed to amend the birth record to reflect the information given in the certificate of adoption. Following amendment of the record, you must notify the adopting parents or parent that the requested amendment has been made and that, upon receipt of the correct fee, you will furnish a certified copy of the record as amended.

If, however, the certificate of adoption or the certified copy of the decree of adoption does not indicate the desire of the adopting parents or parent to have the record of birth of the adopted person corrected, you cannot correct the birth record until you have received a notarized statement signed by the adopting parents or parent, or by the person adopted, requesting that the birth record be corrected.

The certificate of adoption must contain the original name, date and place of birth of the person adopted. If it does not, the correction cannot be made until this information is supplied by the court issuing the adoption decree.

If the certificate of adoption or certified copy of the adoption decree does not contain the facts relative to the adopting parents or parent required for correcting the birth record, the clerk shall not correct such record until he has received an affidavit signed and sworn to by the adopting parents or parent, or by the person adopted.

The certificate of adoption (Massachusetts Form R-891), or the certified copy of the adoption decree and the documentary evidence must be filed with the affidavit and correction, Form R-7.

8. Legal Change of Name

A birth record cannot be amended following a legal change of name except in connection with an adoption, or following sex reassignment surgery.

9. Illegitimate Child Acquiring Legitimate Status by Intermarriage of Parents and Acknowledgement of Paternity

If a person shall have acquired the status of a legitimate child by the intermarriage of his parents and the acknowledgement of his father, or an adjudication of paternity by a court, the record of his birth shall be amended or supplemented so as to read, in all respects, as if such person had been reported for record as born to such parents in lawful wedlock. [46:13, 2nd paragraph]

The original birth record of an illegitimate child may be amended and legitimized upon the following evidence if, in each case, the town clerk is satisfied as to the identity of the person and the facts.

a. if both parents are living; all of the following:

- acknowledgement of paternity by the father, or a court adjudication of paternity
- certified copy of the marriage record, if not on file in your office
- affidavit by both parents

b. if one parent is deceased; all of the following:

- acknowledgement of paternity by the father, or a court adjudication of paternity
- certified copy of the marriage record, if not on file in your office
- certified copy of the death record of the deceased parent, if not on file in your office
- affidavit of the living parent

c. if both parents are deceased; all of the following:

- affidavit of a credible person having knowledge of the fact, such as the person whose record is to be amended or a relative
- certified copy of the marriage record, if not on file in your office
- acknowledgement of paternity by the father, or a court adjudication of paternity
- certified copy of the death record of each parent, if not on file in your office
- you must submit affidavits and documentary evidence to a judge of probate or a justice of the district court for approval prior to amending the birth record

If, however, the birth of a child was recorded as that of a legitimate child of the mother and the man who was her husband at the time of such birth, the record shall not be amended as provided in 46:13 unless:

- the illegitimacy has been legally determined or has been admitted by affidavits of the mother and such husband, OR
- if the town clerk is satisfied that both the mother and such husband cannot be located, he may accept the affidavit of either of them accompanied by documentary evidence substantiating, beyond all reasonable doubt, the statements in the affidavit. In this case, you are required to submit the affidavit and documentary evidence to a judge of probate or a justice of the district court for approval prior to amending the birth record

The procedures outlined in the paragraph above remove the name of the husband from the original record thus making it a record of illegitimate birth. If the mother subsequently marries the natural father, the record may then be amended to legitimize the birth using the procedures outlined on page 26 in paragraphs a, b, or c.

10. Adding Father's Name and Information to the Record of Illegitimate Child

The birth record of an illegitimate child shall be amended in accordance with 46:13 upon the written request of both parents. The documentary evidence required is a notarized statement of both parents acknowledging paternity and requesting that the father's name and information appear on the record. However, if there has been an adjudication of paternity, the birth record may be amended to add the father's information upon the request of only one parent. The documentary evidence required is a certified copy of the adjudication.

11. Fictitious Record

If the mother gave false information for the record at the time of the birth, the mother's affidavit that she gave such false information must be submitted in order to change the record.

If she was married at the time of the birth or conception, but did not list her husband as the father of the child, a certified copy of her marriage record should be submitted together with the mother's sworn statement that she was married at the time.

If she was divorced at the time of the birth but falsely gave her former husband as the father of the child, a certified copy of the divorce decree, which must show that she was divorced at least nine months prior to the birth of the child, must be submitted.

If she was single at the time of the birth, but married when the correction is being made, a certified copy of her marriage record which would indicate that this is her first marriage should be submitted. In this case there would be a difference in the last name of the child on the birth record and the name of the mother when signing the deposition.

C. COMPLETING THE AFFIDAVIT AND CORRECTION OF A RECORD OF BIRTH FOR RECORDING

Enter on the front of the form all the information required making the appropriate additions or corrections. Enter the registered number of the original birth record. Enter in item 20 the date the original record was received and if a record book is used, the volume, page, and number of the original record. Complete and sign the form in item 22.

Assign a deposition number which should be different from the registered number of the original certificate. A convenient numbering system for depositions is one which includes the year and a number such as "80-1," "80-2," etc.

Fill out the back of the form. Be sure the person requesting the correction signs the back of the form in the appropriate place and that you have administered the oath. (see sample oath, page 20) Enter the type of documentary evidence submitted and sign the back of the form.

If the individual who must make the affidavit cannot appear in person in your office, you may accept a notarized affidavit and make the appropriate corrections, provided the affidavit is accompanied by sufficient documentary evidence.

Reference to the affidavit and correction must be entered in the margin of the original record, both on the certificate and in the record book, if one is used to record original birth certificates. Draw a line through any statement, or statements, which were incorrect and enter the correct information directly above. Do not erase any information from the original record.

Transmit a copy of the affidavit and correction to the state registrar and if the original record was transmitted, to the clerk of the town of residence of the parents. (see pages 33 and 34)

FEE: The fee for correcting a birth record is $2.00 [262:34(11), (12)] unless your town meeting has established a different fee.

EXCEPTION: No fee should be charged for amending a record based upon an adoption decree received directly from a court. (see paragraph 7 above)

IV. PERMANENT RECORD [46:1,2]

A. GENERAL

Regardless of the method you use to record births, the certificates themselves are permanent legal records and must be properly protected and preserved. [46:2] [state retention schedule 2.116, 2.123] [see also Chapter 66 of the General Laws covered elsewhere in the Town Clerk's Manual]

B. FILING

1. Standard Certificate of Live Birth

The certificate of birth (Form R-3) shall be conveniently arranged for examination, presumably in order by registered number. The certificates may be permanently bound, or retained in loose leaf binders. If you issue certified copies using some kind of photographic copying method, the loose leaf binders will have an advantage.

You may also, if you wish, copy the information from the certificates required to be recorded under 46:1 into a record book kept specifically for that purpose although this is not necessary for compliance with the General Laws. The advantage of this method is that a larger number of records may be kept together in a smaller space.

2. Delayed Return of Birth and Out-of-State Record of Birth

The Delayed Return of Birth (Form R-5) and the out-of-state record of birth (Form R-4) should be assigned a registered number in the regular order for that year and filed with the birth certificates (Form R-3) of the year in which the birth occurred. The documentary evidence or a copy thereof, attested by the clerk, should be retained and filed with the Delayed Return of Birth or the out-of-state record.

The information on the delayed return or out-of-state record should be entered in the birth record book (if one is used) with other records for the year in which the birth occurred.

3. Affidavit and Correction of a Birth Record

The affidavit and correction of a birth record (Form R-7) must be filed separately from other birth records. The documentary evidence, or a copy thereof attested by the clerk, should be retained and filed with the affidavit and correction.

4. Impounded Records [46:2A, 13]

a. illegitimate birth

A record relating to an illegitimate birth is an impounded record and not open to public inspection. These will be birth certificates on which no information about the father appears, those which are accompanied by the notarized request of both the mother and the father to have the father's name and information appear, or on those containing the notation, "paternity statements received." (see page 159)

b. undetermined sex

Birth records which contain the notation "undetermined" in item 3, sex, are impounded.

c. amended records

An original birth record which has been subsequently amended because of adoption, name change, or for any other reason, is an impounded record and not open to public inspection. (see pages 36 and 38 for persons entitled to examine the original record).

Illegitimate birth certificates may be numbered in order along with other birth certificates received and filed. In addition, such births may be recorded along with other births in your record book, if one is kept.

Because of the impounded nature of certain birth records, you would be justified in refusing to permit public inspection of the certificates or of the record book.

However, you are required to permit inspection of that portion of the records that are public record if they can be segregated from the impounded records. For example, you are required to allow inspection of a page of your record book which does not contain any impounded entries, but this should be allowed only under supervision to assure that the examiner does not turn to a page containing an impounded record. [66:10]

You are also required to furnish upon request and the payment of the required fee a copy of all those records not impounded.

C. INDEXING [46:2]

An index of all birth certificates received and recorded must be kept and each entry shall be numbered in its order. A bound index book may be used.

An index card filing system may also be used as an index to comply with 46:2.

Sample Index Card

JONES, MARY ALICE	VIII:53:23
b. March 4, 1978 in Waltham	
dau. of Walter Roger Jones and Diane Higgins	
Recorded: March 22, 1978	

The entry in the right hand top corner is VIII (volume number), 53 (page number), 23 (registered number). If you do not use a record book, "1978:23" may be substituted to show that the certificate is number 23 of 1978.

Including all of the above information on the index card will enable you to prepare a short form birth certificate directly from the card without reference to the original certificate or to the record book.

V. REPORTING INFORMATION

A. RETURNS TO THE STATE REGISTRAR OF VITAL RECORDS AND STATISTICS [46:17]

The clerk of each town shall, not later than 60 days following every month in which births occur in his town, transmit to the state registrar certified copies of the record of such births, and certified copies of such amendment and corrections of birth records as have not been previously returned. These certified copies should be sent to

Registry of Vital Records and Statistics
McCormack Building, First Floor
One Ashburton Place
Boston, MA 02108

Self-addressed envelopes in which to enclose your copies are available from the state registrar. [Form R-322]

Be sure that all forms and certificates forwarded have been signed. Proofread each certificate, other than the carbon copies of Form R-3, prior to forwarding.

1. Births in your Town

For all births which have occurred in your town, forward form R-3, page 2, Vital Records & Statistics Copy. Be sure

you have entered the name of your town and the registered number at the top right. Also be sure you have signed the record in item 18, that you have entered the date received in item 16, and the date a supplement, if any, was filed in item 17.

2. Town of Mother's Residence

For all births for which you have received Form R-3, page 3 as the clerk of the town of residence of the mother, enter the registered number for each on Pink Form R-327, but do not forward a copy of the birth record as the clerk of the town in which the birth occurred is required to do this.

3. Out-of-State Births

If a birth record has been established under 46:1B, out-of-state birth certificates presented by the parents, copy all the information from both sides onto a Form R-4 and forward it to the state registrar. (see page 14, paragraph 2)

4. Delayed Return of Birth

If you have received and recorded a Form R-5, Delayed Return of Birth, copy all the information on both sides onto a Form R-5 and forward it to the state registrar. (see page 20)

5. Affidavit and Correction

If you have received and recorded a Form R-7, Affidavit and Correction of a Birth, copy all the information on both sides onto a Form R-7 and forward it to the state registrar. (see page 29)

6. Report Form

Pink report Form R-327, should be made out each month to accompany the copies of birth certificates you are fowarding to the state registrar. Enter on Form R-327, the registered number of all birth certificates received during the month which *you are not forwarding*, such as Form R-3, page 3, or Form R-9, copy of a delayed return, which you have received from the clerk of the town in which the birth occurred. Enter the name of the month for which you are reporting in the space provided, date the form and enter the name of your town. Be sure you have signed the form.

Check the registered numbers on copies of certificates you are forwarding and those entered on Form R-327 to be sure you have accounted for all certificates being reported. The lowest number included in the report should be the next

number after that reported for the previous month. For example, if your last month's report ended with registered number 89 (either on a certificate being forwarded or simply reported on Form R-327), the lowest number of the current month's report should be 90. (see sample form page 48)

7. Ordering Forms

At the time you are making your report to the state registrar, check over your supply of vital record forms. If additional forms are needed, make out a requisition for blanks, Form R-501, and include it in your report. (see sample form, page 49) The state registrar's office will send you the supplies requested within a short period of time.

B. RETURNS TO OTHER CITY OR TOWN CLERKS [46:12]

1. Town of Mother's Residence

The clerk of a city or town shall forthwith make a certified copy of the record of each birth recorded during the preceding month and forward it to the clerk of the city or town in which the parents of the child resided at the time of the birth.

If you have received Form R-3, pages 1, 2, and 3, forward page 3, "clerk of residence copy." Be sure that you have dated it and signed it before forwarding.

2. Delayed Return of Birth

If you have received and recorded a Form R-5, Delayed Return of Birth, copy all the information on both sides onto a Form R-9 and forward it to the clerk of the town of residence of the parents. Be sure that you have signed the Form R-9 under item 21. (see sample form, page 47)

NOTE: *Records of illegitimate births on either Form R-3 or R-5 are not to be forwarded to the clerk of the town of residence of the parent as these are impounded records.*

3. Affidavit and Correction

If you have received and recorded a Form R-7, Affidavit and Correction of a Record of Birth, and if a copy of the original birth record was transmitted, copy all the information from both sides onto a Form R-8 and forward it to the clerk of the town of residence of the parents. However, if the original record has been amended because of an adoption, the copy is sent only to the town of residence of the natural parents, not to the town of residence of the adoptive parents. (see sample form, page 46)

C. BOARD OF HEALTH [46:4A]

If the chairman of your local board of health *requests*, you should file daily with that board a list of all births reported to you, showing for each birth the following information: date of birth, sex and name of the child, names of the parents and their residence, name of the physician or officer in charge. This list shall not constitute a public record.

D. FEES TO TOWN CLERKS FOR FORWARDING COPIES OF RECORDS [46:26]

The following fees shall be paid to town clerks for forwarding copies of birth records:

- $1.00 per record (including Forms R-3, R-4, R-5, and R-7) forwarded to the state registrar, after presentation to the town treasurer of a certificate of receipt signed by the state registrar.

- 50¢ per record forwarded to the clerk of another town under the provisions of 46:12.

- $1.00 per record for forwarding affidavit of correction or delayed return of birth to the clerk of another town.

These fees would be paid by the town and would have to be appropriated at town meeting, thus the amount may be limited by the town. Generally a town clerk who is paid partially or fully by appropriated salary is considered to have received the "fees" listed under Section 26. A town clerk who is paid entirely by fees, might be entitled to additional compensation under this section.

VI. PREPARING A CERTIFIED COPY OF A BIRTH RECORD [46:19]

A. GENERAL

A certified copy of a birth record, signed by the town clerk or assistant clerk and to which the town seal has been affixed, is admissable in court as evidence of such a record. Forms to be used in issuing certified copies may be designed by the town or purchased from a commercial supplier. The state registrar of vital records and statistics does not furnish these forms.

Upon request and payment of the required fee, you are required to furnish a copy of all records not impounded.

B. AMENDED, CORRECTED, OR SUPPLEMENTED RECORDS

If you issue a copy of an amended, corrected, or supplemented record, certify to the facts contained therein as amended, corrected, or supplemented. You may release the information contained in the original record only under certain circumstances as follows:

1. Adoption

If the original record was amended following adoption in accordance with 46:13, you may release the information contained in the original record *only* upon receipt of an order from the probate court for the county in which the adoption was granted. In the case of an adoption granted outside the commonwealth, the order must come from the probate court of the county in which the birth occurred.

2. Correction or Illegitimate Child Acquiring Legitimacy

If the original record was amended because the original was incorrect, or it was the record of an illegitimate child who acquired the status of legitimate by intermarriage of his natural parents, the information on the original record may be released upon proper judicial order, or when requested by a person seeking his own birth record or by a person whose official duties, in the opinion of the clerk, entitle him to the information contained in the original record.

3. Date of Record

The original date of record must be included on all certified copies and the date the record was amended should be added, *except* on those records amended following adoption or those records relating to an illegitimate child who obtained legitimate status through intermarriage of his parents. On these two kinds of corrected records, there should be nothing on the certified copy to indicate a correction of the original record has been made.

C. LONG FORM

The long form contains the information included on the original certificate under items 1(b), 2, 3 and 5 through 13. The date of record and registered number must also appear. In addition, if a record book is used, the volume and page number should be added. (see sample long form, page 50) The clerk's certificate that the information contained on the form is a true copy of the record should be made out, signed, and the official town seal affixed.

Simply copy the information from the original record onto the form in the appropriate spaces. If the original record has been amended, copy the information as amended except under the circumstances given above.

If the original record relates to a birth which occurred prior to January 1, 1969, color will appear and should be entered on the long form unless you receive a request in writing to omit the color. [46:19]

If you wish you may make a copy of the original certificate using a photographic process. Add your attestation and affix a seal. However, under ordinary circumstances if the original certificate has been amended you may not use this method since the amended information would also appear on the copy.

FEE: For certified copy, long form $2.00 [262:34(13)] unless your town meeting has established a different fee.

D. ABSTRACTS (short form)

Upon request for an abbreviated record of birth, the clerk or assistant clerk shall make an abstract of the record without notation thereon of the name(s) of the parent(s), except by request of the applicant. A card is often used for an abstract or short form birth certificate and is usually sufficient for all purposes except for obtaining a passport. (see samples of abstract birth records, pages 52 and 53)

FEE: For certified copy, abstract: $1.00 [262:34(13A)] unless your town meeting has established a different fee.

NOTE:
- *No fee is to be charged for a copy of a birth record (long form or abstract) relating to a veteran, provided such copy is for use in relation to a claim against the United States or the commonwealth.* [262:46A]
- *Also no fee is to be charged for a copy of a birth record which is to be used to obtain an employment permit issued by the superintendent of schools to a person under 16 years of age.* [149:89] *An abstract or short form may be used for this purpose.*

E. IMPOUNDED RECORDS

Copies of impounded records may *not* be issued to any person except upon proper judicial order, upon the request of a person seeking his own birth record, or his attorney, parent, guardian, conservator, or a person whose official duties, in the opinion of the clerk, entitle him to the information contained therein. These provisions do not apply to births recorded or filed prior to January 1, 1841. [46:2A]

A certified copy of a birth record furnished under section 2A (illegitimate births) shall not, unless the applicant so requests or unless the certificate is to be used in conjunction with a judicial proceeding, include the name or any other information regarding the mother. [46:2A] The certificate would contain only the name of the child, date and place of birth, and the date of the record. A pre-printed form should be used for this kind of certificate. However, if you do not have any pre-printed forms, the certificate may be typed on letterhead paper. Regardless of whether you use a pre-printed form or letterhead paper, the certificate must be signed and the town seal affixed.

F. REPRODUCING CERTIFICATES OR RECORDS BY UNAUTHORIZED PERSONS [46:19A]

Reproducing a certified copy or an original record, by any person other than the town clerk, assistant clerk, state registrar, or one of his deputies, shall be prohibited.

EXCEPTION: A register of deeds, register of probate or other county, state, municipal or federal keeper of public records may, in the course of his official duties, reproduce such certificates or records as are required by his office.

VII. PENALTIES ON CLERKS

- For refusing to perform any duty required under Chapter 46 -- fine of not less than $20.00 nor more than $100.00. [46:27]

- If an illegitimate birth, for printing the name of the child or the parents in a town report-- forfeit to the mother of such child not more than $100.00. [46:24]

PLEASE TYPEWRITE – EXCEPT SIGNATURE – ALL COPIES MUST BE LEGIBLE ABC NC

USE ONLY STATE APPROVED RIBBONS AND MASS. STANDARD INK
AS REQUIRED BY GEN. LAWS, CHAP. 66 SECT. 4

1 1/82
LOCAL CLERK'S COPY

Form R-3

125,000 FORM R-3 1/81 160470

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

STANDARD CERTIFICATE OF LIVE BIRTH

Largetown (City or Town making this return)

3 REGISTERED NUMBER

CHILD

PLACE OF BIRTH
1a Midshire (County)
1b Largetown (City or Town)
1c Community Hospital (NAME OF HOSPITAL — IF NOT IN HOSPITAL, NUMBER & STREET)

2 NAME: Mary (FIRST) Alice (MIDDLE) Jones (LAST)

3 SEX	4 THIS BIRTH SINGLE, TWIN, ETC SPECIFY	4a IF NOT SINGLE, BORN FIRST, SECOND, ETC SPECIFY ORDER OF BIRTH	5 DATE OF BIRTH (MONTH DAY YEAR)	5a HOUR
Female	Single		Jan 25, 1982	9:45 A.M.

FATHER

6 FULL NAME: Jonathan (FIRST) James (MIDDLE) Jones (LAST)

7 BIRTHPLACE: Boston (CITY OR TOWN) Massachusetts (STATE OR COUNTRY)

8 AGE AT TIME OF THIS BIRTH: 30

9 OCCUPATION: Attorney

MOTHER

10 FULL NAME: Susan (FIRST) Jane (MIDDLE) Johnson (MAIDEN) Jones (LAST)

11 BIRTHPLACE: Seattle (CITY OR TOWN) Washington (STATE OR COUNTRY)

12 AGE AT TIME OF THIS BIRTH: 28

13 RESIDENCE: 15 (NO) Center St. (STREET) Smalltown (CITY OR TOWN) Midshire (COUNTY) Massachusetts (STATE)
(DO NOT USE MAILING ADDRESS)

CERTIFICATIONS

14 CERTIFIER

☒ M.D. - ATTENDANT AT BIRTH ☐ POST NATAL ONLY
☐ ATTENDANT - IF OTHER THAN M.D. ☐ ATTENDANT - C.N.M.

Frank J. Berther M.D. (Signature, Physician or other attendant)

Frank J. Berther M.D.
(Print or type name Chapter 48, Acts of 1959)

Largetown, MA
(Address)

15 INFORMANT

I certify that the information appearing above is true and correct

Susan J. Jones (Signature)

Mother (Relationship) Jan. 26, 1982 (Date)

Box 331, Smalltown, MA 01234
(Present mailing address if different from Item #13)

16 RECD IN CLERK'S OFFICE: Feb. 3, 1982

17 SUPPLEMENT FILED: Feb. 10, 1982

18 Mary K. O'Reilly (CLERK OR REGISTRAR)

CONFIDENTIAL INFORMATION – CHAPTER 111 SECTION 24B AS AMENDED
PHYSICIAN TO COMPLETE ITEMS IN RED WITHIN 24 HOURS (CH. 46 SEC. 3)

HOSPITAL CODE NO.

19 RACE-FATHER	20 EDUCATION-FATHER	PREGNANCY HISTORY (Complete each section)	
WHITE, BLACK, AMERICAN INDIAN, ETC. (SPECIFY)	(Specify only highest grade completed) Elementary or Secondary (0-12) / College (1 - 4 or 5+)	LIVE BIRTHS (Do not include this child) NOW LIVING / NOW DEAD	OTHER TERMINATIONS (Spontaneous and Induced) BEFORE 20 WEEKS / AFTER 20 WEEKS
22 RACE-MOTHER	23 EDUCATION-MOTHER	21a Number ____ None ☐ / 21b Number ____ None ☐	21d Number ____ None ☐ / 21e Number ____ None ☐
WHITE, BLACK, AMERICAN INDIAN, ETC. (SPECIFY)	(Specify only highest grade completed) Elementary or Secondary (0-12) / College (1 - 4 or 5+)	21C Date of Lost Live Birth (Month, Year)	21f Date of Last Other Termination (as indicated in d or e above)

24 DATE OF LAST NORMAL MENSES BEGAN (MONTH DAY YEAR)	25 MONTH OF PREGNANCY PRENATAL CARE BEGAN FIRST, SECOND, THIRD, ETC. (SPECIFY)	26 PRENATAL VISITS TOTAL NUMBER (IF NONE, SO STATE)

27 COMPLICATIONS RELATED TO PREGNANCY (Describe or write "None")	28 CONCURRENT ILLNESSES OR CONDITIONS AFFECTING THE PREGNANCY (Describe or write "none")

29 COMPLICATION OF LABOR AND/OR DELIVERY		30 CONGENITAL MALFORMATIONS OR ANOMALIES OF CHILD (Describe or write "None")
A (Describe or write "None")	B. Caesarean (Check One) ☐No ☐ Primary ☐ Repeat	

31 BIRTH WEIGHT lbs. ozs. / or grams	32 APGAR SCORE a. 1 min. / b. 5 min.	33 IS MOTHER MARRIED? (Specify yes or no)	34 PATIENT CARE ☐ PRIV. ☐ OTHER ☐ M.I.C.	35 AT TIME OF THIS REPORT ☐ CHILD LIVING ☐ DEAD

Detach and Return to Department of Public Health – Registry of Vital Records and Statistics,
Room 107, McCormack Building; 1 Ashburton Place, Boston, MA 02108

LOCAL CLERK'S COPY

PATERNITY STATEMENTS RECEIVED

Form R-3

125,000 FORM R-3 1/81 160470

The Commonwealth of Massachusetts IMPOUNDED

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

STANDARD CERTIFICATE OF LIVE BIRTH

Largetown (City or Town making this return)

10 REGISTERED NUMBER

CHILD

PLACE OF BIRTH
1a Midshire (County)
1b Largetown (City or Town)
1c Community Hospital — NAME OF HOSPITAL — IF NOT IN HOSPITAL, NUMBER & STREET

2 NAME: John (FIRST) David (MIDDLE) Smith-Jones (LAST)

3 SEX: Male | 4 THIS BIRTH SINGLE, TWIN, ETC SPECIFY: Single | 4a IF NOT SINGLE, BORN FIRST, SECOND, ETC SPECIFY ORDER OF BIRTH: | 5 DATE OF BIRTH: Feb. 1, 1982 (MONTH DAY YEAR) | 5a HOUR: 6:30P M.

FATHER

6 FULL NAME: John (FIRST) David (MIDDLE) Jones (LAST)

7 BIRTHPLACE: Libertyville (CITY OR TOWN) PA (STATE OR COUNTRY) | 8 AGE AT TIME OF THIS BIRTH: 25

9 OCCUPATION: Salesman

MOTHER

10 FULL NAME: Sarah (FIRST) Anne (MIDDLE) Smith (MAIDEN) (LAST)

11 BIRTHPLACE: Boston (CITY OR TOWN) MA (STATE OR COUNTRY) | 12 AGE AT TIME OF THIS BIRTH: 25

13 RESIDENCE: 42 (NO) Maple St. (STREET) Largetown (CITY OR TOWN) Midshire (COUNTY) MA (STATE)
(DO NOT USE MAILING ADDRESS)

CERTIFICATIONS

14 CERTIFIER

☒ M.D. - ATTENDANT AT BIRTH ☐ POST NATAL ONLY
☐ ATTENDANT - IF OTHER THAN M.D. ☐ ATTENDANT - C.N.M.

Frank J. Berther M.D. (Signature, Physician or other attendant)

Frank J. Berther, M.D.
(Print or type name Chapter 48 Acts of 1959)

Largetown, MA
(Address)

15 INFORMANT

I certify that the information appearing above is true and correct

Sarah A. Smith (Signature)

Mother (Relationship) Feb. 3, 1982 (Date)

(Present mailing address if different from Item #13)

16 REC'D IN CLERK'S OFFICE: Feb.10,1982

17 SUPPLEMENT FILED

18 Mary K. O'Reilly
CLERK OR REGISTRAR

LOCAL CLERK'S COPY

Physician's statement on file

125,000 FORM R-3 1/81 160470

The Commonwealth of Massachusetts IMPOUNDED

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

STANDARD CERTIFICATE OF LIVE BIRTH

Smalltown (City or Town making this return)

8 REGISTERED NUMBER

CHILD

PLACE OF BIRTH
1a Midshire (County)
1b Smalltown (City or Town)
1c 691 Main Street — NAME OF HOSPITAL — IF NOT IN HOSPITAL, NUMBER & STREET

2 NAME: Mary-Louise (FIRST) Frances (MIDDLE) Singleton (LAST)

3 SEX: Female | 4 THIS BIRTH SINGLE, TWIN, ETC SPECIFY: Single | 4a IF NOT SINGLE, BORN FIRST, SECOND, ETC SPECIFY ORDER OF BIRTH: | 5 DATE OF BIRTH: Feb.4, 1982 (MONTH DAY YEAR) | 5a HOUR: 4:30A M.

FATHER

6 FULL NAME: (FIRST) (MIDDLE) (LAST)

7 BIRTHPLACE: (CITY OR TOWN) (STATE OR COUNTRY) | 8 AGE AT TIME OF THIS BIRTH:

9 OCCUPATION:

MOTHER

10 FULL NAME: Jane (FIRST) Anne (MIDDLE) Singleton (MAIDEN) (LAST)

11 BIRTHPLACE: Largetown (CITY OR TOWN) MA (STATE OR COUNTRY) | 12 AGE AT TIME OF THIS BIRTH: 22

13 RESIDENCE: 691 Main Street (NO STREET) Smalltown (CITY OR TOWN) Midshire (COUNTY) MA (STATE)
(DO NOT USE MAILING ADDRESS)

CERTIFICATIONS

14 CERTIFIER

☐ M.D. - ATTENDANT AT BIRTH ☐ POST NATAL ONLY
☒ ATTENDANT - IF OTHER THAN M.D. ☐ ATTENDANT - C.N.M.

Mrs. Frances L. Singleton (Signature, Physician or other attendant)

Mrs. Frances L. Singleton
(Print or type name Chapter 48 Acts of 1959)

691 Main St., Smalltown, MA
(Address)

15 INFORMANT

I certify that the information appearing above is true and correct

Jane Anne Singleton (Signature)

Mother (Relationship) Feb. 6, 1982 (Date)

(Present mailing address if different from Item #13)

16 REC'D IN CLERK'S OFFICE: Feb.26,1982

17 SUPPLEMENT FILED

18 Carole L Smith
CLERK OR REGISTRAR

FORM-R3-S

1/82

The Commonwealth of Massachusetts
JOHN F. X. DAVOREN
SECRETARY OF THE COMMONWEALTH
DIVISION OF VITAL STATISTICS

SUPPLEMENTAL REPORT FOR THE ADDITION OF GIVEN NAME (S) TO BIRTH RECORD

PLEASE NOTE

To have name (s) added to the birth record, this form must be returned to

Town Clerk

on or before March 1, 1982

CITY OR TOWN Largetown

REGISTERED NUMBER 15

DATE OF BIRTH February 1, 1982

LAST NAME Johnson

FULL NAME OF CHILD Douglas (First) Brian (Middle (If any)) Johnson (Last)

SIGNATURE OF PARENT William M Johnson

Feb. 20, 1982
(Date Signed)

DATE RECEIVED AND NAME ADDED February 26, 1982

Mary K. O'Reilly
(REGISTRAR)

LEFT SIDE

The Commonwealth of Massachusetts
JOHN F. X. DAVOREN
SECRETARY OF THE COMMONWEALTH
DIVISION OF VITAL STATISTICS

Dear Parents:

A birth report of your new born child has been filed in this office but it does not include the given name (s).

As you know, this record will be one of the most important documents in your child's future as it will be needed for school entrance, work permits, driver's license, marriage license, pensions, etc. So that your child will not be inconvenienced or embarrassed in the future, because of the lack of a first name on his birth record, would you please fill out the attached form and return it to this office within ten days. Upon its receipt the report will be completed and made a permanent record here and in the office of the Secretary of the Commonwealth.

Failure on your part to reply within the ten days will result in the recording of this birth without the given name, causing some inconvenience and expense to you or your child when the name is to be added in the future. In that event, an affidavit substantiated by documentary evidence and a payment of a statutory fee will be required.

Please reply at once.

Very truly yours,

Mary K. O'Reilly
Town Clerk

LOCAL CLERK'S COPY

PATERNITY STATEMENTS RECEIVED

Form R-3

125,000 FORM R-3 1/81 160470

The Commonwealth of Massachusetts IMPOUNDED

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

STANDARD CERTIFICATE OF LIVE BIRTH

Largetown (City or Town making this return)

10 REGISTERED NUMBER

CHILD

1 PLACE OF BIRTH
a Midshire (County)
b Largetown (City or Town)
c Community Hospital — NAME OF HOSPITAL — IF NOT IN HOSPITAL, NUMBER & STREET

2 NAME: John (FIRST) David (MIDDLE) Smith-Jones (LAST)

3 SEX: Male
4 THIS BIRTH SINGLE, TWIN ETC SPECIFY: Single
4a IF NOT SINGLE, BORN FIRST, SECOND, ETC SPECIFY ORDER OF BIRTH:
5 DATE OF BIRTH: Feb. 1, 1982 (MONTH DAY YEAR)
5a HOUR: 6:30P M.

FATHER

6 FULL NAME: John (FIRST) David (MIDDLE) Jones (LAST)
7 BIRTHPLACE: Libertyville (CITY OR TOWN) PA (STATE OR COUNTRY)
8 AGE AT TIME OF THIS BIRTH: 25
9 OCCUPATION: Salesman

MOTHER

10 FULL NAME: Sarah (FIRST) Anne (MIDDLE) Smith (MAIDEN LAST)
11 BIRTHPLACE: Boston (CITY OR TOWN) MA (STATE OR COUNTRY)
12 AGE AT TIME OF THIS BIRTH: 25
13 RESIDENCE: 42 (NO) Maple St. (STREET) Largetown (CITY OR TOWN) Midshire (COUNTY) MA (STATE)
(DO NOT USE MAILING ADDRESS)

CERTIFICATIONS

14 CERTIFIER

☒ M.D. - ATTENDANT AT BIRTH ☐ POST NATAL ONLY
☐ ATTENDANT - IF OTHER THAN M.D. ☐ ATTENDANT C.N.M.

Frank J Berther MD
(Signature, Physician or other attendant)

Frank J. Berther, M.D.
(Print or type name Chapter 48 Acts of 1959)

Largetown, MA
(Address)

15 INFORMANT

I certify that the information appearing above is true and correct

Sarah R. Smith
(Signature)

Mother (Relationship) Feb. 3, 1982 (Date)

(Present mailing address if different from Item #13)

16 REC'D IN CLERK'S OFFICE: Feb.10,1982

17 SUPPLEMENT FILED

18 Mary K. O'Reilly
CLERK OR REGISTRAR

LOCAL CLERK'S COPY

Physician's statement on file

125,000 FORM R-3 1/81 160470

The Commonwealth of Massachusetts IMPOUNDED

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

STANDARD CERTIFICATE OF LIVE BIRTH

Smalltown (City or Town making this return)

8 REGISTERED NUMBER

CHILD

1 PLACE OF BIRTH
a Midshire (County)
b Smalltown (City or Town)
c 691 Main Street — NAME OF HOSPITAL — IF NOT IN HOSPITAL, NUMBER & STREET

2 NAME: Mary-Louise (FIRST) Frances (MIDDLE) Singleton (LAST)

3 SEX: Female
4 THIS BIRTH SINGLE, TWIN ETC SPECIFY: Single
4a IF NOT SINGLE, BORN FIRST, SECOND, ETC SPECIFY ORDER OF BIRTH:
5 DATE OF BIRTH: Feb.4, 1982 (MONTH DAY YEAR)
5a HOUR: 4:30A M.

FATHER

6 FULL NAME: (FIRST) (MIDDLE) (LAST)
7 BIRTHPLACE: (CITY OR TOWN) (STATE OR COUNTRY)
8 AGE AT TIME OF THIS BIRTH:
9 OCCUPATION:

MOTHER

10 FULL NAME: Jane (FIRST) Anne (MIDDLE) Singleton (MAIDEN LAST)
11 BIRTHPLACE: Largetown (CITY OR TOWN) MA (STATE OR COUNTRY)
12 AGE AT TIME OF THIS BIRTH: 22
13 RESIDENCE: 691 Main Street (NO STREET) Smalltown (CITY OR TOWN) Midshire (COUNTY) MA (STATE)
(DO NOT USE MAILING ADDRESS)

CERTIFICATIONS

14 CERTIFIER

☐ M.D. - ATTENDANT AT BIRTH ☐ POST NATAL ONLY
☒ ATTENDANT - IF OTHER THAN M.D. ☐ ATTENDANT C.N.M.

Mrs Frances L. Singleton
(Signature, Physician or other attendant)

Mrs. Frances L. Singleton
(Print or type name Chapter 48 Acts of 1959)

691 Main St., Smalltown, MA
(Address)

15 INFORMANT

I certify that the information appearing above is true and correct

Jane Ann Singleton
(Signature)

Mother (Relationship) Feb. 6, 1982 (Date)

(Present mailing address if different from Item #13)

16 REC'D IN CLERK'S OFFICE: Feb.26,1982

17 SUPPLEMENT FILED

18 Carole L Smith
CLERK OR REGISTRAR

FORM R-5

MARGIN RESERVED FOR BINDING
WRITE PLAINLY. WITH UNFADING BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON
THIS IS A PERMANENT RECORD

3M - 5/79 PHR

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

DELAYED RETURN OF BIRTH

Smalltown (City or Town making this return)

Registered No. 20

Deposition No. 82-7

1 PLACE OF BIRTH: Midshire (County); Smalltown (City or Town)

No. 12 Spruce STREET WARD (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2 FULL NAME OF CHILD: Sadie Bertha Finch

3 Sex F; 4 Color W; 5 If plural Births: (a) Twin, triplet or other; (b) Number, in order of birth

6 Date of Birth: August 10, 1922 (Month) (Day) (Year)

7 FATHER	13 MOTHER
FULL NAME: James Alphonse Finch	MAIDEN NAME: Bertha Alice Starling PRESENT NAME: Bertha S. Finch
8 PERMANENT RESIDENCE, NO. 12 Spruce STREET (At Time Birth Occurred)	14 PERMANENT RESIDENCE, NO 12 Spruce STREET (At Time Birth Occurred)
CITY OR TOWN Smalltown STATE MA	CITY OR TOWN Smalltown STATE MA
9 COLOR OR RACE: White	15 COLOR OR RACE: White
10 AGE AT TIME OF BIRTH: 20 (Years)	16 AGE AT TIME OF BIRTH: 18 (Years)
11 PLACE OF BIRTH: Largetown (City or Town) MA (State or Country)	17 PLACE OF BIRTH: Salem (City or Town) NH (State or Country)
12 OCCUPATION: Farmer (At Time of Birth)	18 OCCUPATION: Housewife (At Time of Birth)

19 Attendant at birth or informant: William L. Countryman, M.D. (Name) Physician (Physician, Parent, or Other)
(If there was no physician or attendant, draw line through "attendant at birth or")
Address No. 42 Maple St., Smalltown, MA (City or Town)

28 Affidavit filed and recorded and a copy of return and affidavit transmitted to the Commissioner of Public Health: April 16, 1982 (Month) (Day) (Year)

21 Deponent Name	City or town	Relation to child
James A. Finch, Jr.		older brother

See Reverse Side for Affidavit

22 The above record has been made in accordance with the provisions of General Laws, Chap. 46, Sec. 13A.
Attest: Carole L. Smith (Clerk or Registrar)
Smalltown (City or Town)

REVERSE SIDE

MARGIN RESERVED FOR BINDING

An affidavit containing the facts required for record accompanied by documentary evidence substantiating such facts beyond reasonable doubt, if made by a person required by law to furnish the information for the original record, or, at the discretion of the town clerk, by credible persons having knowledge of the case Extract from Gen Laws, Chap 46, Sec. 13

A person who is unable to furnish such an affidavit for the establishment of his birth record may petition the clerk or registrar of the city or town wherein it is claimed his birth occurred for the recording of his birth If the evidence submitted by the petitioner is satisfactory to said clerk or registrar as a basis for establishing such record, he shall accept the same and record the birth . . Extract from Gen Laws, Chap 46, Sec 13A

AFFIDAVIT

The Commonwealth of Massachusetts } ss.
County of Midshire }

James A. Finch, Jr.,

being duly sworn, deposes and says that he resides at 66 Appleton Way, Wayton, MA

that deponent has knowledge of the birth of Sadie Bertha Finch

named on the reverse side of this blank.

Proof of residence of the parents at the time of the birth Poll Tax Record for 1922

Further, The evidence in a writing made at or near the time of birth submitted to substantiate the affidavit was Certified copy of baptismal record - September 16, 1922
Certified copy of parents' marriage record

(Deponents Signature) James A. Finch Jr.

Sworn to and subscribed before me,
this 16th day of April, 19 82

Carole L. Smith
(City or town clerk, assistant clerk, or registrar)

NOTICE

Expense of affidavit should be borne by the individual making this return.

INSTRUCTIONS AS TO EXECUTION OF PAPERS TO RECORD DELAYED RETURNS OF BIRTH

1. If birth occurred in a hospital, a notarized statement from the hospital should be submitted to substantiate the affidavit.

2. If birth occurred at home, the delayed return should be authenticated by a writing made at or near the time of birth such as a Bible or family record, a church record, a census record or a school entrance record. There must also be proof that the parents resided in the city or town at the time it is claimed that the birth occurred. A street listing or voters registration for the year of the birth constitutes such evidence.

3. A delayed return may be filed with satisfactory written evidence when there is no one available to furnish the affidavit (Chapter 46, Section 13A).

4. The name on the return should be the same as that appearing on the documentary evidence being submitted.

CITY AND TOWN CLERKS SHOULD TRANSMIT A COPY OF THIS RETURN TO THE Commissioner of Public Health AT ONCE

20M–1–71–048565

R–6 1/82

(Rev. 11–70)

PLEASE TYPEWRITE – EXCEPT SIGNATURE – ALL COPIES MUST BE LEGIBLE
USE ONLY STATE APPROVED RIBBONS AND MASS. STANDARD INK
AS REQUIRED BY GEN. LAWS. CHAP. 66 SECT. 4

This form is to be used only for transmitting copy to the State Secretary of a record of birth occurring outside of the state to residents of your city or town when reported to you directly from place of birth as provided by Chapter 46, Section 12.

CLERICAL ERROR

The Commonwealth of Massachusetts

JOHN F. X DAVOREN
SECRETARY OF THE COMMONWEALTH
DIVISION OF VITAL STATISTICS

COPY OF CERTIFICATE OF LIVE BIRTH

(City or Town making this return)

Registered No. 58 16

CHILD

1. PLACE OF BIRTH
   a. (State or Country) Midshire
   b. (City or Town) Largetown
   c. NAME OF HOSPITAL – IF NOT IN HOSPITAL, NUMBER & STREET Community Hospital
2. NAME Carol (First) Elizabeth (Middle) Doone (Last)
3. SEX F
4. THIS BIRTH SINGLE, TWIN ETC. SPECIFY Single
4a. IF NOT SINGLE, BORN FIRST, SECOND, ETC. SPECIFY ORDER OF BIRTH
5. DATE OF BIRTH May 15, 1964 (MONTH (SPELL OUT) DAY YEAR)

FATHER

6. FULL NAME Albert (First) Francis (Middle) Doone (Last)
7. BIRTHPLACE Smalltown (City or Town) Massachusetts (State or Country)
8. AGE AT TIME OF THIS BIRTH 24
9. OCCUPATION Mechanic

MOTHER

10. FULL NAME Elizabeth (First) Jane (Middle) Dunn (Maiden) Doone (Last)
11. BIRTHPLACE Chicago (City or Town) Illinois (State or Country)
12. AGE AT TIME OF THIS BIRTH 23
13. RESIDENCE 8 (No.) Upton Drive (Street) Smalltown (City or Town) Massachusetts (State)

14. Child was born at the hour of 6:03 A M, on the date above stated. Information given was furnished by Elizabeth D. Doone, Mother (relationship)

ATTENDANT AT BIRTH Frank J. Berther, M.D. (Name) Physician (Physician, parent or other, etc.)

ADDRESS NO. 99 Cross Street ST., Largetown, Massachusetts (City or Town) (State)

15. RECEIVED June 28, 1964 (Month) (Day) (Year)

Mary K. O'Reilly

REGISTRAR OF CITY OR TOWN WHERE BIRTH OCCURRED

Original Recorded July 10, 1964

16. RECEIVED May 10 1982 (Month) (Day) (Year)

Carol L Smith

REGISTRAR OF CITY OR TOWN WHERE PARENTS RESIDE

FORM R-7

MARGIN RESERVED FOR BINDING
WRITE PLAINLY, WITH UNFADING BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON — THIS IS A PERMANENT RECORD

Form R-7 — 20M — 11/77 PHR

The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF
VITAL RECORDS AND STATISTICS

AFFIDAVIT AND CORRECTION OF A RECORD OF BIRTH

Largetown (City or Town making this return)

Registered No. 66

Deposition No. 82-9

PLACE OF BIRTH: Midshire (County); Largetown (City or Town)

No. Community Hospital STREET (If birth occurred in a hospital or institution give its NAME instead of street and number)

2 FULL NAME OF CHILD: Brian Sean Connolly

3 Sex M | 3a Color W | 4 If plural Births: (a) Twin, triplet or other ..... (b) Number, in order of birth ..... | 5 Total number of children born alive previous to this birth 3 | 6 Date of Birth August 1, 1955 (Month) (Day) (Year)

7 FATHER	13 MOTHER
FULL NAME: Aloysius Francis Connolly	MAIDEN NAME: Mary Joan Shaughnessy PRESENT NAME: Mary Joan Connolly
8 RESIDENCE, NO. 10 Pine STREET CITY OR TOWN Smalltown STATE MA	14 RESIDENCE, NO. 10 Pine STREET CITY OR TOWN Smalltown STATE MA
9 COLOR OR RACE White; 10 AGE 24 (YEARS)	15 COLOR OR RACE White; 16 AGE 22 (YEARS)
11 PLACE OF BIRTH Boston (City or Town) MA (State or Country)	17 PLACE OF BIRTH Boston (City or Town) MA (State or Country)
12 OCCUPATION Policeman	18 OCCUPATION Housewife

19 ATTENDANT AT BIRTH OR INFORMANT Frank J. Berther, M.D. (Name) Physician (Physician, parent or other, etc.)

ADDRESS NO. 99 Cross Street ST., Largetown, MA (City or Town)

20 Original Return Received August 25, 1955 (Month) (Day) (Year)

21 Original Record: Vol. XIII Page 19 No. 66

22 The above corrections with reference to the statement on the back of this blank have been entered upon the birth records of the Town (City or Town) of Largetown (Name of City or Town), in accordance with the provisions of Gen. Law Chapter 46, Section 13, this 6th day of April 19 82, and a copy of these corrections and affidavit has been transmitted to the Secretary of the Commonwealth.

Mary K. O'Reilly (Clerk or Registrar)

REVERSE SIDE

DEPOSITION

ALL ADDITIONS AND CORRECTIONS MUST BE SUBSTANTIATED BY WRITTEN EVIDENCE (Sect. 13 of Chap. 46)

WRITE LEGIBLY WITH DURABLE BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON

The Commonwealth of Massachusetts
County of Midshire } ss.:

The undersigned, being duly sworn, depose and say that the record relating to the birth of Brian Sean Conolly (Give name of child exactly as recorded on the original record) in the town (city or town) of Largetown (Name of city or town), does not fully and correctly state child's surname, father's surname and mother's present surname

Item(s) 2, 7, 13, and that the true statement of facts omitted or incorrectly stated in said record has been supplied by her (Him or her) on the form of certificate on the other side of this blank.

SIGNATURE	RESIDENCE (City or town, street and number, if any)	Relation to child, if any
Mary Joan Connolly	10 Pine St. Smalltown, MA	mother

FURTHER, The evidence in a writing made at or near the time of birth submitted to substantiate the affidavit was: Certified copy of parents' marriage record

Then personally appeared before me the person whose signature appear above and made oath that the statements subscribed to by her are true.

Date, April 6, 1982 Name Mary K. O'Reilly

Official designation Town Clerk (City or town clerk, assistant clerk, or registrar)

MARGIN RESERVED FOR BINDING

Records can only be corrected in accordance with the facts as they actually existed at the time the event occurred. Names that have been changed or subsequently acquired, cannot be the basis for an amendment or correction of the original record, except by adoption, records of illegitimate persons that have had their names changed by court decree or have become legitimate by the marriage of their parents.

FORM R-8
1/82

MARGIN RESERVED FOR BINDING

WRITE PLAINLY, WITH UNFADING BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON — THIS IS A PERMANENT RECORD

For making copy of form R-7 to be sent to the city or town clerk of the place of residence of the parents at the time of birth, if a copy of the original record had been so sent.

SM 8/61

The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF
VITAL RECORDS AND STATISTICS

COPY OF AFFIDAVIT and CORRECTION OF A RECORD OF BIRTH

Smalltown
~~Largetown~~
(City or Town making this return)

Registered No. 66 40

Deposition No. 82-87

1 PLACE OF BIRTH: Midshire (County); Largetown (City or Town)

No. Community Hospital STREET (If birth occurred in a hospital or institution give its NAME instead of street and number)

2 FULL NAME OF CHILD: Brian Sean Connolly

3 Sex M; 3a Color W

4 If plural Births: (a) Twin, triplet or other ; (b) Number, in order of birth

5 Total number of children born alive previous to this birth 3

6 Date of Birth August 1, 1955 (Month) (Day) (Year)

7 FATHER	13 MOTHER
FULL NAME Aloysius Francis Connolly	MAIDEN NAME Mary Joan Shaughnessy PRESENT NAME Mary Joan Connolly
8 RESIDENCE, NO. 10 Pine STREET CITY OR TOWN Smalltown STATE MA	14 RESIDENCE, NO. 10 Pine STREET CITY OR TOWN Smalltown STATE MA
9 COLOR OR RACE White; 10 AGE 24 (YEARS)	15 COLOR OR RACE White; 16 AGE 22 (YEARS)
11 PLACE OF BIRTH Boston, MA (City or Town) (State or Country)	17 PLACE OF BIRTH Boston, MA (City or Town) (State or Country)
12 OCCUPATION Policeman	18 OCCUPATION Housewife

19 ATTENDANT AT BIRTH OR INFORMANT Frank J. Berther, MD (Name) Physician (Physician, parent or other, etc.)

ADDRESS NO. 99 Cross Street ST., Largetown, MA (City or Town)

20 Original Return Received August 22, 1955 (Month) (Day) (Year)

21 Original Record: Vol. XIII Page 19 No. 66

22 RECEIVED April 6, 1982 (Month) (Day) (Year)
Mary K. O'Reilly
(Clerk or Registrar of City or Town where birth occurred)

23 RECEIVED April 26, 1982 (Month) (Day) (Year)
Carole L Smith
(Clerk or Registrar of City or Town where parents reside)

REVERSE SIDE

COPY OF DEPOSITION

ALL ADDITIONS AND CORRECTIONS MUST BE SUBSTANTIATED BY WRITTEN EVIDENCE (Sect. 13 of Chap. 46)

WRITE LEGIBLY WITH DURABLE BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON

The Commonwealth of Massachusetts
County of Midshire } ss.:

The undersigned, being duly sworn, depose and say that the record relating to the birth of Brian Sean Conolly (Give name of child exactly as recorded on the original record) in the town (city or town) of Largetown (Name of city or town),

does not fully and correctly state Child's surname, father's surname and mother's present surname

Item(s) 2,7,13, and that the true statement of facts omitted or incorrectly stated in said record has been supplied by her (Him or her) on the form of certificate on the other side of this blank.

SIGNATURE	RESIDENCE (City or town, street and number, if any)	Relation to child, if any
S/ Mary Joan Connolly	10 Pine St. Smalltown, MA	mother

FURTHER, The evidence in a writing made at or near the time of birth submitted to substantiate the affidavit was: Certified copy of parents' marriage record

Then personally appeared before me the person whose signature appear above and made oath that the statements subscribed to by her are true.

Date, April 6, 1982 Name Mary K. O'Reilly

Official designation Town Clerk (City or town clerk, assistant clerk, or registrar)

MARGIN RESERVED FOR BINDING

FORM R-9

MARGIN RESERVED FOR BINDING
WRITE PLAINLY, WITH UNFADING BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON — THIS IS A PERMANENT RECORD

N.B. This form is for transmittal to the clerk of the city or town where the parents resided at the time of the birth.

The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF
VITAL RECORDS AND STATISTICS
COPY OF DELAYED
RETURN OF BIRTH

(CITY OR TOWN MAKING THIS RETURN)

Registered No. ~~73~~ 16
Deposition No. 82-~~10~~ 8

1 PLACE OF BIRTH: Midshire (COUNTY); Largetown (CITY OR TOWN)

NO. Community Hospital STREET
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2 FULL NAME OF CHILD: John Xavier McGillicuddy

3 SEX: M
4 COLOR: W
5 IF PLURAL BIRTHS: (A) TWIN, TRIPLET OR OTHER ... (B) NUMBER, IN ORDER OF BIRTH ...
6 DATE OF BIRTH: July 4, 1941 (MONTH) (DAY) (YEAR)

7 FATHER	13 MOTHER
FULL NAME: Francis Albert McGillicuddy	MAIDEN NAME: Mary Elizabeth Jones PRESENT NAME: Mary J. McGillicuddy
8 PERMANENT RESIDENCE. NO. 9 Overton STREET (AT TIME BIRTH OCCURRED) CITY OR TOWN Smalltown STATE MA	14 PERMANENT RESIDENCE. NO. 9 Overton STREET (AT TIME BIRTH OCCURRED) CITY OR TOWN Smalltown STATE MA
9 COLOR OR RACE: White 10 AGE AT TIME OF BIRTH: 31 (YEARS)	15 COLOR OR RACE: White 16 AGE AT TIME OF BIRTH: 30 (YEARS)
11 PLACE OF BIRTH: Paris, Maine (CITY OR TOWN) (STATE OR COUNTRY)	17 PLACE OF BIRTH: Naples, Maine (CITY OR TOWN) (STATE OR COUNTRY)
12 OCCUPATION: U.S. Navy (AT TIME OF BIRTH)	18 OCCUPATION: Housewife (AT TIME OF BIRTH)

19 ATTENDANT AT BIRTH OR INFORMANT: Frank J. Berther, M.D. (NAME) Physician (PHYSICIAN, PARENT, OR OTHER)
(If there was no physician or attendant, draw line through "attendant at birth or")
ADDRESS NO. 99 Cross Street ST. Largetown, MA (CITY OR TOWN)

20 Affidavit filed and recorded and a copy of return and affidavit transmitted to the Commissioner of Public Health: June 8, 1982 (MONTH) (DAY) (YEAR)

21	22
RECEIVED: June 8, 1982 (MONTH) (DAY) (YEAR)	RECEIVED: June 11, 1982 (MONTH) (DAY) (YEAR)
Mary K. O'Reilly	Carole L. Smith
CLERK OR REGISTRAR OF CITY OR TOWN WHERE BIRTH OCCURRED	CLERK OR REGISTRAR OF CITY OR TOWN WHERE PARENTS RESIDE

2M 8/81

REVERSE SIDE

COPY OF AFFIDAVIT

THE COMMONWEALTH OF MASSACHUSETTS } ss.:
COUNTY OF Midshire }

Francis A. McGillicuddy

being duly sworn, deposes and says that he resides at 9 Overton Street, Smalltown, MA

that deponent has koowledge of the birth of John Xavier McGillicuddy

oamed on the reverse side of this blank.

Proof of residence of the pareots at the time of the birth

Further, The evidence io a writing made at or near the time of birth submitted to substantiate the affidavit was Certified copy of hospital record

(Deponent's Signature) S/ Francis A. McGillicuddy

Sworn to and subscribed before me,
this 8th day of June, 19 82

Mary K. O'Reilly
(City or town clerk, assistant clerk, or registrar)

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF
VITAL RECORDS AND STATISTICS

The registration numbers assigned by me to the certificates for the month of May, of children born to residents of this town in some other city or town within the commonwealth, which have not been returned to you, are as follows:

Nos.

90, 97-100, 104

Date June 15 19 82 (Signed) Mary K. O'Reilly

Clerk of Largetown
(Name of City or Town)

NOTE: USE FORM B-6 FOR MAKING A RETURN OF A RECORD OF A BIRTH OCCURING OUTSIDE OF THE COMMONWEALTH TO A RESIDENT OF YOUR MUNICIPALITY IF YOU HAVE RECEIVED THE RECORD DIRECTLY FROM THE CITY OR TOWN CLERK OR STATE OFFICE. (CHAP. 46, SECT. 12)
USE FORM B-4 WHEN MAKING A RETURN OF A RECORD OF AN OUT OF STATE BIRTH ESTABLISHED UNDER CHAP. 46, SECT. 1-B

Form B-127. 10M - 1/78 phr

R-501 7/81 - 3M

THE COMMONWEALTH OF MASSACHUSETTS

1/82

Department of Public Health
Registry of Vital Records and Statistics

REQUISITION FOR BLANKS

BIRTHS		AMOUNT
R-3	all births occurring in your city or town	25
R-3S	supplemental form for adding given names	25
R-4	(yellow) record of birth out of state (46:1B)	
R-5	delayed record of birth	6
R-6	(tinted) return of out of state birth to resident (46:12)	
R-7	affidavit and correction of record of birth	12
R-8	(tinted) resident copy of the affidavit and correction	
R-9	(tinted) resident copy of the delayed record of birth	
R-327	(tinted) face sheet for births	10
MARRIAGES		
R-100	Legal Impediments of Marriage	
R-101	Standard certificate of marriage	100
R-102	(tinted) return of out of state marriage to resident (46:12)	
R-104	affidavit and correction of record of marriage	12
R-105	Notice of Intention	100
R-106	Delayed record of marriage	

MARRIAGE CONTINUED		AMOUNT
R-107	(yellow) record of marriage out of state (207:36)	
R-329	annual intention report	
DEATHS		
R-301	standard certificate of death	25
R-302	resident copy of death & resident (out of state) 46:12	
R-306	affidavit and correction of record of death	12
R-307	delayed record of death	
R-308	(yellow) record of death out of state (46:1C)	
R-309	official burial permit	100
R-309A	copy of burial permit	
R-326	(yellow) face sheet for deaths	
MISCELLANEOUS		
R-322	return envelope for reporting	12
R-501	requisition form for blanks	12

FROM:

CITY OR TOWN OF Largetown

SIGNED: Mary K O'Reilly

PLEASE COMPLETE:

Address to send supply order:

Town Clerk

Town Hall

Largetown, MA 01234

The Commonwealth of Massachusetts

UNITED STATES OF AMERICA.

COPY OF RECORD OF BIRTH

TOWN of LARGETOWN

I, the undersigned, hereby certify that I am clerk of the Town of Largetown that as such I have custody of the records of births required by law to be kept in my office; that among such records is one relating to the birth of

MARY ALICE JONES

and that the following is a true copy of so much of said record as relates to said birth, namely:

Date of Birth January 25, 1982

Place of Birth Largetown, Massachusetts

Name of Child Mary Alice Jones

Sex Female Color

FATHER	MOTHER
Name Jonathan James Jones	Maiden Name Susan Jane Johnson
Residence 15 Center St., Smalltown, MA	Residence 15 Center St., Smalltown, MA
Place of Birth Boston, MA	Place of Birth Seattle, WA
Occupation Attorney	

Date of Record February 3, 1982

SEAL

And I do hereby certify that the foregoing is a true copy from said records.

Witness my hand and seal of said town of Largetown

on this 15th day of April 1982

Mary K. O'Reilly *Clerk*

Year 1982
Vol. VIII
Page 75
No. 3

The Commonwealth of Massachusetts

UNITED STATES OF AMERICA.

COPY OF RECORD OF BIRTH

TOWN of LARGETOWN

I, the undersigned, hereby certify that I am clerk of the Town of Largetown that as such I have custody of the records of births required by law to be kept in my office; that among such records is one relating to the birth of

BRIAN SEAN CONNOLLY

and that the following is a true copy of so much of said record as relates to said birth, namely:

Date of Birth August 1, 1955

Place of Birth Largetown, Massachusetts

Name of Child Brian Sean Connolly

Sex Male Color White

FATHER	MOTHER
Name Aloysius Francis Connolly	Maiden Name Mary Joan Shaughnessy
Residence 10 Pine Street, Smalltown, MA	Residence 10 Pine Street, Smalltown, MA
Place of Birth Boston, MA	Place of Birth Boston, MA
Occupation Policeman	

Date of Record August 25, 1955: Amended April 6, 1982

SEAL

And I do hereby certify that the foregoing is a true copy from said records.

Witness my hand and seal of said Town of Largetown

on this 28th day of April 19 82

Mary K. O'Reilly Clerk

Year 1955

Vol VI

Page 10

No 66

FORM 429 HOBBS & WARREN, INC., PUBLISHERS

EXAMPLE 1

CERTIFICATE OF BIRTH
THE COMMONWEALTH OF MASSACHUSETTS
Town of Largetown
Feb. 3, 1982 March 26 1982
DATE OF RECORD

This is to certify that the records in the office of the Town Clerk show that Mary Alice Jones
Child of Jonathan James Jones and Susan Jane Johnson
was born on the 25th day of January, 1982
in Largetown, Massachusetts
Attest: Mary K O'Reilly
Town Clerk.

EXAMPLE 2

The Commonwealth of Massachusetts
SEAL
Town of Smalltown

June 1, 1982

This is to certify that the records in the office of the Town Clerk show that Mary Alice Jones
~~son~~ dau. of Jonathan James Jones and Susan Jane Johnson
was born on the 25th day of January, 1982
in Largetown, Massachusetts

ATTEST: Carole L. Smith
TOWN CLERK

Year 1982
Vol. VIII
Page 75
Date of Record Feb. 3, 1982

The Commonwealth of Massachusetts

UNITED STATES OF AMERICA

Abstract of Record of Birth

I, the undersigned, hereby certify that I am the Clerk of the Town of Largetown, that as such I have custody of the records of births required by law to be kept in my office; that among such records is one relating to the birth of

MARY ALICE JONES

and that the following is a true abstract of so much of said record as relates to said birth, namely:

Name Mary Alice Jones

Date of Birth January 25, 1982

Place of Birth Largetown, Massachusetts

Name of Father Jonathan James Jones

Maiden Name of Mother Susan Jane Johnson

And I do hereby certify that the foregoing is a true abstract from said records.

SEAL

Witness my hand and Seal of said Town of Largetown on this 15th day of April 19 82

Mary K. O'Reilly
Clerk.

[CERTIFIED COPY OF IMPOUNDED BIRTH RECORD]

[LETTERHEAD PAPER]

June 1, 1982

This is to certify that the records in the office of the Town Clerk show that

MARY-LOUISE FRANCES SINGLETON

was born on February 4, 1982 in Largetown, Massachusetts.

date of record: February 26, 1982.

SEAL

Mary K. O'Reilly
Town Clerk

DEATHS

3
DEATHS

NOTES

I. CERTIFICATE OF DEATH (Form R-301R) (see sample form page 90)

A. GENERAL

1. Facts to be Recorded [46:1]*

Each town clerk shall receive or obtain and record the following facts relative to deaths:

- date of record (the date you received the certificate of death)
- date of death
- name of the deceased
- sex
- color or race
- marital status (whether single, divorced, married, widowed)
- age
- residence
- occupation
- place of death
- place of birth
- names and places of birth of the parents, including maiden name of mother

---

*Throughout this manual many references will be made to the General Laws of the Commonwealth which apply to specific items and where further information may be found. In order to conserve space, the following legend will be used: The first number denotes the chapter of the General Laws and numbers after the colon, the section of that particular chapter. For example: [46:1] means chapter 46, section 1 of the General Laws.

- disease or cause of death
- place of interment
- if deceased was a veteran, the war in which he served
- if deceased was a married or divorced woman or a widow, her maiden name and the name of her husband. Note: Form R-301R does not require the maiden name of a woman under item 1 but obtains that information under item 15a, father's name.

The above information, except as noted, appears on the Standard Certificate of Death, Form R-301R. In addition, the date of birth of the deceased and other information not required under 46:1 also appears.

NOTE: *The Commissioner of Public Health may require that additional information, as he deems necessary, be included in the Standard Certificate of Death.* [46:1]

B. SOURCES OF INFORMATION

See Appendix B for details on information to be entered on the death certificate and persons responsible for completing each item.

1. Physician or Medical Officer

A physician, after the death of a person whom he has attended during his last illness, or the physician declaring such a person dead, shall immediately furnish for registration a Standard Certificate of Death, to an undertaker or any member of the family of the deceased. [46:9]

If the death occurred in a hospital, the certificate may be furnished by a registered hospital medical officer duly appointed by the hospital director or administrator. [46:9]

If there is no attending physician, or if, for sufficient reasons his certificate cannot be obtained early enough for the purpose of obtaining a burial permit, or his certificate is insufficient, a physician who is a member of or employed by the board of health or employed by the selectmen, shall, upon application, make the certificate of death. [114:45]

Under certain circumstances, a medical examiner is required to furnish the Standard Certificate of Death. [38:6] (see paragraph 2 below)

The physician, medical examiner, or hospital medical officer who signed the certificate of death is the "certifier" referred to on Form R-301R.

2. Medical Examiners

Medical examiners and associate medical examiners are appointed by the governor with the advice and consent of the Governor's Council, in and for counties and districts in counties divided into districts. [38:1]

a. when required to act [38:6]

The medical examiner for the district or the county in which a body lies, shall be immediately notified by a physician or any person having knowledge of a death occurring under the following circumstances:

- by violence
- by the action of chemical, thermal, or electrical agents
- following an abortion
- from diseases resulting from injury or infection relating to occupation
- suddenly when not disabled by recognizable disease
- from malnutrition
- from sexual abuse
- a child who is determined to be physically dependent upon an addictive drug at birth
- when a person is found dead

The medical examiner may, at his discretion, waive jurisdiction and in this case a physician who is not a medical examiner may make out and sign the certificate of death.

b. medical examiner's duties with respect to Standard Certificate of Death

In any of the above cases, except when he has waived jurisdiction, the medical examiner as the "certifier" is responsible for filling out and signing the certificate of death.

3. Undertakers or Funeral Directors

Every undertaker or other person in charge of a funeral shall obtain the certificate of death from the physician, medical officer, or medical examiner and enter the facts which he is required to record. [46:11]

4. Special Notices

a. householders, superintendents of houses of correction, hospitals, etc. [46:6]

Every householder in whose house a death occurs and the oldest next of kin of a deceased person in the town where the death occurs shall, within five days thereafter, cause notice thereof to be given to the board of health, or if the selectmen constitute such board, to the town clerk. The keeper, superintendent, or person in charge of a house of correction, prison, reformatory, hospital, infirmary, or other institution public or private, which receives inmates from within or without the limits of the town where it is located shall, when a person is received, obtain a record of all the facts which would be required for record in the event of the death of such person and shall, on or before the fifth day of each month, give notice to the town clerk of every death among the persons under his charge during the preceding month. The facts required by 46:1 and 46:1A shall, so far as obtainable, be included in every notice given under this section.

NOTE: *You will seldom, if ever, receive a notice given under 46:6 as this is not a general practice.*

b. commanding officers of vessels [46:7]

The master or other commanding officer of a vessel shall give notice, with the facts required for record (under 46:1) of every death occurring among persons under his charge. The notice of death shall be given to the board of health, or if the selectmen constitute such board, to the clerk of the town at which his vessel first arrives after such death.

C. PENALTIES FOR NON-COMPLIANCE

1. On Physicians

For neglecting or refusing to furnish a certificate of death as provided in 46:9, or making a false statement therein--not more than $50. [46:9B]

For neglecting to furnish a recital that the deceased was a veteran and neglecting to certify both the primary and secondary or immediate cause of death on such certificates--$10. [46:10]

2. On Funeral Directors and Undertakers

For permitting his name to be used in connection with any death certificate or burial permit unless he was specifically engaged to perform the burial to which the permit relates--fine of $50. [114:45A]

For violation of any of the provisions of Chapter 114, sections 44-48 (cremation and burial)--a fine of not more than $50. [114:50]

3. On Others

For unauthorized reproduction of an original or certified copy of a death record--fine of not more than $100. [46:19]

Penalty for any of the following is a fine of not more than $500 or imprisonment for not more than 6 months in a house of correction. [46:30]

- falsely making, altering, forging, counterfeiting a copy of a death certificate
- procuring or assisting another to falsely make, forge or counterfeit such a copy
- forging or using without authority the signature, facsimile of a signature or validating stamp of a city or town clerk or the state registrar upon a genuine or falsely made copy
- uttering, publishing as true, or in any way making use of a falsely made, altered, forged, or counterfeited copy

D. COMPLETING THE CERTIFICATE OF DEATH FOR RECORDING

1. Massachusetts Certificates [46:1, 12]

a. town of death [46:1]

You should receive and record all certificates of death relating to individuals who died in your town, regardless of their place of residence. These certificates will be Standard Certificate of Death, Form R-301R. (see sample form, page 90)

Check each item on the certificate to be sure it is complete and legible. (see Appendix B for complete information required)

If you issue burial permits, as agent for the board of health, you should check the certificate of death prior to issuing the burial permit. If the certificate is not satisfactory, contact the physician or undertaker to obtain or clarify the necessary information.

If you do not serve as the agent, contact the board of health or its agent who issued the burial permit and ask that certificates be checked more carefully prior to accepting them. Inform the board of health or agent that a burial permit may be refused until such time as a satisfactory certificate of death is presented. However, refusals to issue burial permits should be kept to a minimum. (see page 62)

If the certificate of death is acceptable, or has been clarified and made acceptable, complete item 29 including the name of your town, the date received, and your signature.

b. town of residence of the deceased [46:12]

You should also receive and record all certificates of death relating to individuals who were residents of your town at the time of death but who died elsewhere in Massachusetts. [46:12] These certificates will be either the pink Standard Certificate of Death, Form R-302R, or an attested photocopy of Form R-301R and will be received from the clerk of the city or town in which the death occurred.

Pink Form R-302R is exactly the same as Form R-301R except that the clerk of the town in which the death occurred will have dated and signed it in item 28. You should complete Form R-302R by dating and signing it in item 29. (see page 91 for sample form)

Complete an attested photocopy of R-301R by noting the date of receipt and signing it on the back of the form.

c. town of burial of veteran [46:12]

You should also receive and record all certificates of death relating to a veteran who was buried in your town even if he died elsewhere in Massachusetts and was a resident of another Massachusetts town. These certificates will be either pink Form R-302R or an attested photocopy of Form R-301R and will be received from the clerk of the city or town in which the death occurred. Complete these forms as outlined in paragraph b above.

For all certificates received, Form R-301R as the clerk of the town of death and Form R-302R or photocopy of Form R-301R as the clerk of the town of residence or the town of burial of a veteran, assign a registered number at the top of the certificate in the space provided. Number each certificate in consecutive order as it is received for each death which took place from January 1 through December 31 of that year. Even though you may not receive some of the certificates until sometime during the next year, number them in order in the year in which the death occurred.

Do not enter anything in the block at the top of the certificate under "State Use Only."

2. Out-of-State Deaths for Which Certificate Has Been Received from Spouse or Heirs [46:1C]

The spouse or heirs at law of any resident of the commonwealth who dies outside the commonwealth may personally present to the town clerk of the town where such person was domiciled at the time of his death, an original certificate or duly authenticated (certified) photostatic copy thereof. The town clerk may file such certificate or photostatic copy as evidence establishing the death, or he may make a copy thereof, which he shall attest as a true copy and which he may then file as such evidence.

If, in the opinion of the clerk, the certificate, photostatic copy, or other written evidence is satisfactory to establish the death, a record may be established using Form R-308, Record of Death Outside of Commonwealth. The information from the evidence submitted should be copied onto the Form R-308. If the information is missing, it may be supplied by the person requesting that the record be established. Further documentary evidence would not be necessary for the information under items 13 through 23 on Form R-308 as this information is supplied by the informant on the Standard Certificate of Death. The person requesting that the death record be established must make out the affidavit on the back of the Form R-308 and swear to the truth of it. (refer to sample oath, page 66) However, you must have proof that the deceased was a resident of your town at the time of death. The types of evidence sufficient to establish proof of residence are listed on the back of Form R-308. Lack of proof of residence would be grounds for refusing to establish the death record, *unless* the deceased was a veteran buried in your town. (see page 99 for sample form)

The written evidence, or a copy of it attested by the clerk, should be attached to and filed with the Form R-308.

A Form R-308 which has been accepted for recording should be dated, signed, and assigned a registered number in the regular order for the year in which the death occurred.

a. refusal to accept

If the certificate, written evidence, or photostatic copy relating to the death of the individual is not sufficient, in the opinion of the clerk, to establish the death record, the clerk may refuse to accept the evidence or establish the record. Your refusal should be given in writing to the person wishing to establish the record. He may then petition a judge of probate for the county wherein the town lies. After a hearing, at which the clerk must be given an opportunity to be heard, the judge may order the clerk to receive the evidence as sufficient and establish the death record.

3. Out-of-State Certificate Received Directly from an Official

If you receive, directly from a clerk of a city or town outside of the commonwealth, or from an official of another state, a certified copy of the death record relating to an individual who was a resident of your town, or to a veteran who was buried in your town, the death *cannot* be recorded *unless* the procedures outlined in paragraph 2 above are followed.

While it is not required by the General Laws, you may notify the spouse or heirs that you have received the death certificate. If they wish to have the death recorded, either the spouse or an heir may execute the required deposition on Form R-308. The out-of-state death certificate may be used as the required documentary evidence and missing information in items 13 through 23 on Form R-308 may be supplied by the person wishing to establish the record without further documentary evidence.

NOTE: *Prior to March 23, 1982, the effective date of Chapter 684 of the Acts of 1981, it was possible to record under 46:12 an out-of-state death without a deposition if a certified copy of the death record was received directly from an out-of-state official. However, Chapter 684 eliminated this provision from 46:12. You may find out-of-state deaths among your older records. These records may have been prepared using out-of-state certificate only, or using the out-of-state certificate and Form R-302R without a deposition.*

4. Establishing a Death Record for a Serviceman Who Died Outside the Commonwealth [46:1C]

The procedure outlined in paragraph 2 above should be followed in establishing a death record for a serviceman who died outside the commonwealth.

The spouse or next of kin of the deceased must present documentary evidence of death to the clerk of the town where the serviceman was a legal resident. Such evidence would be an official document or certified copy of the death record properly signed by the appropriate officer, which may have accompanied the body brought home for burial, or it may be what is referred to as a finalized report of death forwarded to the next of kin by the designated officer of the branch of service of which the serviceman was a member.

Form R-308 should be used. The missing information, if any, may be supplied by the deponent who would be similar to the informant on a Standard Certificate of Death. The official death record submitted as evidence must be retained by the clerk and filed with Form R-308.

If for some reason the person wishing to establish a death record does not have a copy of the official government document, he may be advised to request a copy from whichever of the following addresses is applicable to the deceased's branch of service.

ARMY NAVY AIR FORCE MARINES	--	Secretary of Defense, Washington, D.C. 20301
COAST GUARD	--	Commandant, P.S., U.S. Coast Guard, Washington, D.C. 20226

Proof of residence in your town is required before the record may be established. (see the back of Form R-308)

II. DELAYED RETURN OF DEATH (Form R-307)

A. GENERAL [46:13, fifth paragraph)

Form R-307, Delayed Return of Death (see sample form, page 98) should be used only in those cases when the death which occurred in Massachusetts was *not* previously recorded. Ordinarily, this form would be used only when the original certificate failed, for some reason, to reach the clerk of the town in which the individual died. It should be used only to establish a record of death of someone who died in your town, *not* the death of a person who was a resident of your town but died elsewhere in Massachusetts.

If the death did not occur in your town, advise the individual wishing to establish the death record to contact the clerk of the town in which the death occurred, as that is the town in which the record must be established. If the deceased was buried in your town, you may be able to check the burial permits on file to find the place of death.

Before proceeding to process a Delayed Record of Death, check the following possibilities:

- If you are not the agent for the board of health for issuing burial permits (see page 80), check with the board to be sure it did not simply neglect to forward the original certificate to you, particularly if it relates to a fairly recent death. If the board has the certificate ask it to forward it to you and file and record the certificate along with the other certificates of death for the year in which the death occurred.

- If the board of health or its agent has lost the original certificate, the name of the physician and undertaker may be obtained from the records of burial permits issued. If the physician can be contacted, he should make out a new certificate of death supplying, from his records, the information he was required to supply on the original record. The undertaker should supply, from his records, the information required to be entered by him on the original record.

- If the individual died in another Massachusetts town and you have not received a copy of the certificate of death as the clerk of the town of residence of the deceased or the clerk of the town of burial of a veteran, check with the clerk of the town in which the death occurred. If the certificate was filed in that town, ask that clerk to forward the required copy to you.

If you cannot obtain a certificate of death using one of the procedures outlined above and you believe that a Delayed Return of Death is in fact necessary, check first with the state registrar's office. Only under very rare circumstances would a delayed return be necessary. Documentary evidence is required to substantiate the information entered on the front of Form R-307.

B. DOCUMENTARY EVIDENCE

When establishing a Delayed Return of Death, the resultant record will be only as good as the evidence upon which it was based. Documentary evidence may consist of the following:

- certified copy of the burial permit obtained from the board of health or its agent. A copy of the burial permit stub will substantiate the following:
  - name of funeral director
  - name of deceased
  - age of deceased
  - place and date of death
  - cause of death
  - place of interment
  - physician who certified the original certificate of death
- A copy of Section 2 of the burial permit will substantiate the following:
  - whether or not the deceased was a veteran and where buried
  - the residence of the deceased at the time of death
- A copy of Section 3 of the burial permit will show you:
  - where the original burial permit was issued
  - the name of the deceased and whether or not a veteran
  - where the deceased was buried
- certified copy of hospital record, if the deceased died in a hospital, or a certified copy of the physician's record
- a certified copy of the cemetery record
- certified copy of the deceased's birth record to substantiate items 9, 10, 13, 17 through 21, on Form R-307
- certified copy of the deceased's marriage record to substantiate items 11, 12, 17 through 21, on Form R-307
- certified copy of deceased's parents' marriage record to substantiate items 18 through 21 on Form R-307

- street list, voter registration record or residence certificate from the clerk of the town of residence to substantiate the residence at the time of death.

C. COMPLETING THE DELAYED RETURN OF DEATH FOR RECORDING

On the front of Form R-307, enter the information obtained from the documentary evidence submitted in the appropriate items 1 through 20. Date and sign the front of the form at the right bottom corner.

Assign a registered number in the regular order along with the standard certificates of death for the year in which the death occurred. Enter the number at the top right of the form in the space provided.

The back of the form must also be completed by entering the county in which your town lies, the name of the deceased, and the name of your town. The types of documents used to substantiate the facts must also be entered.

The required affidavit must be signed and sworn to by the spouse or heir of the deceased.

SAMPLE OATH

Do you solemnly swear that the statement you have signed is true to the best of your knowledge and belief?

You should then date and sign the back of the form and enter your title.

You may accept a notarized affidavit if the deponent cannot appear in person in your office *provided* it is accompanied by sufficient documentary evidence.

Transmit a copy of completed Form R-307 to the state registrar and to the clerk of the town of residence of the deceased and, if he was a veteran, to the town of burial. (see pages 75 and 76)

FEE: The fee for filing a delayed return of death is not specified in 262:34, probably because delayed returns are rare. Since the fee for a delayed return of birth is $2.00 [262:34(14)], that amount might be charged unless your town meeting has established a different fee. Check with your town counsel to determine an appropriate fee.

III. AFFIDAVIT AND CORRECTION OF A RECORD OF DEATH (Form R-306)

A. GENERAL [46:13]

Form R-306, Affidavit and Correction of a Record of Death, should be used to correct information contained in or to add information missing from a death certificate which has already been recorded. Amendments or additions to a death record can be made only to reflect the correct information at the time of death. (see sample form, page 96)

Minor errors in the personal data entered by the undertaker on the certificate of death, Form R-301R, may be corrected by him if they are discovered at the time the certificate is filed, or shortly thereafter, *provided* no certified copies of the record have been issued or all issued certified copies have been returned. In this case, the affidavit and correction is not needed. However, this procedure should be used with caution and it is suggested that you check first with the state registrar's office for advice.

If you record deaths in a separate record book, check the original death certificate before proceeding with an affidavit and correction to be sure that a simple error in copying the information has not been made.

Form R-306 requires an affidavit which appears on the back of the form. The affidavit may be made by the attending physician, medical examiner, funeral director, undertaker, or a relative of the deceased having knowledge of the facts. In all cases, sufficient documentary evidence must accompany the affidavit.

Form R-306 should be made out and accepted *only* in the town in which the death occurred. If the record to be corrected is that of a person who was a resident of your town at the time of death, or who was a veteran buried in your town, but the death occurred elsewhere, advise the person wishing to have the correction made to go to the town in which the death occurred. After the correction has been made in the town in which the death occurred, that town clerk will forward to you a copy of the affidavit and correction which can be used to correct your records.

B. DOCUMENTARY EVIDENCE

The documentary evidence required will depend upon specifically what information is to be corrected.

1. To Correct Cause of Death

The cause of death may be corrected only by the attending physician or medical examiner with his notarized affidavit that the cause of death stated on the original certificate was in error.

However, if the physician or medical examiner cannot be contacted, the affidavit may be made by the spouse or heir of the deceased with the following documentary evidence:

- certified copy of physician's or medical examiner's records
- certified copy of hospital record, if the individual died in a hospital

2. To Correct Other Information

In order to correct other information the following documentary evidence may be used: (listed under each item in order of acceptability)

a. the name of the deceased

- certified copy of deceased's marriage record
- certified copy of birth record

b. names of parents and/or birthplace of parents

- certified copy of deceased's birth record
- certified copy of parent's birth record
- certified copy of parent's marriage record
- port of entry, immigration, naturalization record of parents

c. age at time of death

- certified copy of birth record
- baptismal certificate
- life insurance policy
- employment certificate
- school record
- immigration, naturalization record
- passport
- court record

NOTE: *If a certified copy of the birth record cannot be obtained, the document made closest to the time of birth should be used even though it may appear lower on the list than another document.*

d. residence at time of death

- street list
- voter registration record
- residence certificate from the clerk of town of residence

e. occupation

- W-2 form
- statement from place of employment on letterhead (does not need to be notarized)

f. birthplace

- certified copy of birth record

g. date and/or place of burial

- certified copy of cemetery superintendent's record

C. COMPLETING THE AFFIDAVIT AND CORRECTION OF A RECORD OF DEATH FOR RECORDING

On the front of Form R-306, enter the information required in items 1 through 25d or 26e as appropriate, making the additions or corrections. Enter the registered number of the original certificate to which the Form R-306 relates in the box at the top right of the form under "registered number." In addition, assign a deposition number and enter it beneath the registered number. A convenient deposition numbering system is one including the year and a number such as "80-1," "80-2," etc.

Enter the deponent's name in item 27 and the date the original certificate was received in item 27a. Enter the name of the person who issued the burial permit and the date it was issued in item 28. Enter the name of your town and sign the form in item 29.

On the back of the form, enter the name of the county in which your town lies, the name of the deceased as it appeared on the original certificate. Enter the residence of the deponent and the relationship to the deceased. Enter the type of documentary evidence submitted.

Be sure that the deponent signs the form, that you have administered the oath and signed the form as well. (see page 66 for sample oath)

You may accept a notarized affidavit if the deponent cannot appear in person in your office *provided* it is accompanied by sufficient documentary evidence.

Reference to the affidavit and correction must be made in the margin of the original record to which it refers, both on the certificate and in the record book, if one is used. Draw a line through any statement or statements which have been corrected and enter the information directly above. Do not erase any information on the original record.

Transmit a copy of the affidavit and correction to the state registrar and to the clerk of the town of residence of the deceased and to the town of burial if the deceased was a veteran. (see pages 75 and 76)

FEE: The fee for amending a death record is $2.00 to be paid by the person requesting that the record be amended [262:34(29)], unless your town meeting has established a different fee.

IV. PERMANENT RECORDS

A. GENERAL

Regardless of the method you use to record deaths, the certificates themselves are *permanent* legal records and must be properly protected and preserved. [46:2] (state retention schedule 2.132-2.139) (see also Chapter 66 of the General Laws covered elsewhere in the *Town Clerk's Manual*)

B. FILING

1. Standard Certificate of Death

The certificates of death (Form R-301R and R-302R) shall be conveniently arranged for examination, presumably in order by registered number. [46:2] The certificates may be permanently bound or retained in looseleaf binders. If you issue certified copies of records using some kind of copying equipment, the looseleaf binders will have an advantage.

You may also, if you wish, copy the information required to be recorded under 46:1 from the certificates into a book kept specifically for that purpose although this is not necessary in order to comply with the General Laws.

2. Delayed Return of Death and Out-of-State Record of Death

The Delayed Return of Death (Form R-307) and Out-of-State Record of Death (Form R-308) should be filed with the death certificates (Forms R-301R and 302R) of the year in which the death occurred and assigned a registered number in the regular order for that year. The documentary evidence or a copy thereof attested by the clerk should be retained and filed with the Delayed Return of Death or the out-of-state record.

The information on the delayed return or out-of-state record should be entered in the death record book, if one is used, with other records for the year in which the death occurred.

3. Affidavit and Correction

Completed Form R-306, affidavit and correction, together with the documentary evidence or a copy thereof, must be filed separately from other death certificates. If you use a book in which to record the Forms R-306, it must be a separate deposition record book. The name and residence of the person making the affidavit must be recorded.

4. Impounded Records [46:2A, 13]

a. Certificate of Fetal Death, Form R-304

A Certificate of Fetal Death, Form R-304, is an impounded record and not open to public inspection. These certificates were used between 1960 and 1977 and you will find some of them in your records prior to January 1, 1978. (see sample form, page 94)

The requirement for completing, filing, and recording a Certificate of Fetal Death as a permanent record in the town clerk's office, under 46:9A, was repealed by Chapter 598 of the Acts of 1977. Form R-304 is now used only as a statistic filed with the Department of Public Health.

If, however, you issue burial permits as agent for the board of health, you may occasionally receive a Form R-304 solely for the purpose of the burial permit. These Forms R-304 may be destroyed 30 days after issueing the burial permit and *cannot* be recorded as a legal record in your office.

b. stillborn

Certificates on which the term "stillborn" has been entered are impounded records and not open to public inspection. Stillborn was entered on standard certificates of death prior to the printing and use of Form R-304 and will be found in your records prior to 1960.

c. amended certificates

An original death certificate which has subsequently been amended is an impounded record and not open to public inspection.

See page 80 for those persons entitled to the information contained in an impounded record.

Impounded records may have been numbered in order along with other certificates of death received and filed. In addition, such deaths may have been recorded along with other deaths in the record book, if one was kept. If this arrangement was used, you would be justified in refusing to permit public inspection of the bound certificates or the record book.

However, you are required to permit inspection of that portion of the records that are public records if they can be segregated from the impounded records. For example, you are required to allow inspection of a page in your record book which does not contain any impounded entries, but this should be done only under supervision to assure that the examiner does not turn to a page containing an impounded record. (see 66:10)

C. INDEXING [46:2]

An index of all certificates of death received and recorded must be kept and each entry numbered in its order. A bound book may be used for this purpose.

An index card filing system may also be used as an index to comply with 46:2.

SAMPLE INDEX CARD

JONES, MARY A.	VII:155:26
dec. Dec. 30, 1934 in Sudbury	female, married
age 82-11-10	retired housekeeper
born: Boston	Husband: William E. Jones
d. David Smith & Mary Murphy	
buried: Old North, Sudbury	

The entry at the top right hand corner is VII (volume number), 155 (page number), 26 (registered number). If you do not use a record book, 1934:26 may be substituted to show the certificate is number 26 of 1934.

All of the information shown does not need to be entered on the index card, but you should be sure to include enough information so that the record can be properly identified as the one for which you are looking. Otherwise, your index card will not be usable as a quick reference to the record.

V. REPORTING INFORMATION

A. RETURNS TO THE STATE REGISTRAR OF VITAL RECORDS AND VITAL STATISTICS [46:17]

The clerk of each city and town shall, on or before the tenth day of every month, transmit to the state registrar upon forms furnished by him, certified copies of the records of deaths occurring therein during the preceding month or, in case no such deaths have occurred, a certificate of such fact. (report form 326) (see sample form, page 100)

Certified copies of death certificates should be prepared using a typewriter or Massachusetts standard ink and should be sent to:

Registry of Vital Records and Statistics
McCormack Building, First Floor
One Ashburton Place
Boston, MA 02108

Self-addressed envelopes in which to enclose your copies are available from the state registrar. (Form R-322)

Be sure that forms and certificates forwarded have been signed. Proofread each certificate prior to forwarding unless you use the photographic method outlined below.

46:18 allows for the photographic or microphotographic process for copying records to be forwarded to the state registrar. However, the following conditions must be met:

- paper must be 100% rag content, 24 pound weight, white
- the reproduction must be clear and sharp and must be cut to 7 1/2" x 9" after reproduction (the size of the original certificate)
- there can be no erasures, strikeovers, or cross outs on the original record
- each copy must have the clerk's attestation on the reverse side. Facsimile signatures may be used. The attestation and signature should not be placed on the margin side of the certificate since they will subsequently be hidden when the certificate is bound.

Prior to using this method the first time, send a sample copy you intend to use to the state registrar for his approval.

1. Deaths Occurring in Your Town

For all deaths which have occurred in your town, copy all of the information appearing on the Form R-301R onto a Form R-301R, sign the copy under item 29, enter the date you received it, and forward it.

If you have received a second death certificate, Form R-301R, from a medical examiner because the first certificate showed the cause of death as pending investigation, make out a Form R-301R entering the information from the first certificate received except item 23. Add from the second certificate the information under items 20 through 24f and item 26b. Add a note in the margin "investigation completed." In item 29 enter the name of the town, the date the first certificate was recieved, and your signature. Then forward it to the state registrar.

If you should receive the second certificate after you have already forwarded a copy of the first certificate to the state registrar, follow the same procedure. However, attach a note to the certificate forwarded to the state registrar to inform him that you are forwarding the certificate to include the results of the medical examiner's investigation and that it is not an entirely new certificate.

2. In-state, Another Town

If you have received a Form R-302R, or an attested photocopy of Form R-301R from the clerk of the city or town in which the death occurred, enter your registered number on Form R-326 (yellow monthly report form). Do *not* forward a copy of the certificate. (see sample Form R-326, page 100)

3. Death of Resident Out-of-State

If you have recorded an out-of-state death under 46:1C using a Form R-308, copy all the information, including the affidavit on the back of the form onto a Form R-308, sign it, and forward it.

4. Delayed Return of Death

If, as the clerk of the town in which a death occurred, you have received and recorded a Form R-307, Delayed Return of Death, copy all of the information, including the affidavit on the back of the form onto a Form R-307 and forward it. *Do not* forward a copy of Form R-307 which you have received as the clerk of the town of residence of the deceased or as the clerk of the town in which a veteran was buried.

5. Affidavit and Correction of Record of Death

If you have received and recorded a Form R-306, Affidavit and Correction of a Record of Death, copy all the information, including the affidavit on the back of the form onto a Form R-306 and forward it, *only* if the death occurred in your town.

6. Report Form

Yellow report Form R-326 should be made out each month to accompany the copies of death certificates you are forwarding to the state registrar. Enter on Form R-326 the registered number of *all* death certificates received during the month which you are *not forwarding*, such as an attested photocopy of a Standard Certificate of Death, Form R-301R, or a Form R-302R, which you have received from the clerk of the town in which the death occurred. Enter the name of the month for which you are reporting on the space provided on Form R-326. Date the form and enter the name of your town. Be sure that you have signed the form.

Check the registered numbers on copies of certificates you are forwarding and those entered on Form R-326 which you are not forwarding to be sure you have accounted for all certificates being reported. The lowest number included in the report should be the next number after that reported

the previous month. For example, if your last month's report ended with registered number 89 (either on a certificate being forwarded or simply entered on Form R-326), the lowest number of the current month's report should be 90.

7. Reordering Forms

At the time you make out your monthly report for the state registrar, check your supply of death certificate forms. If forms are needed, note what is needed on the order Form R-501 and enclose it with your monthly report. (see sample form, page 49)

B. RETURNS TO OTHER CITY OR TOWN CLERKS [46:12]

1. Town of Residence of Deceased

If the deceased at the time of his death was a resident of another town, the clerk of a city or town shall make a certified copy of the record of each death recorded during the preceding month and transmit such certified copy to the clerk of the city or town where the deceased person was a resident. It is not required, but you may forward a copy to the clerk of the town of residence if the deceased was an out-of-state resident.

The permanent residence of the deceased is given in item 14 on Form R-301R. Copy all of the information from the Form R-301R onto a pink Form R-302R, date and sign it under item 28, and forward to the clerk of the town of residence of the deceased.

2. Affidavit and Correction and Delayed Return

If you have received and recorded a Form R-306, Affidavit and Correction of a Record of Death, or a Form R-307, Delayed Return of Death, make another copy on the appropriate form, either Form R-306 or R-307, and forward it to the clerk of the town of residence of the deceased.

3. Additional Returns if the Deceased was a Veteran [46:12] [114:46A]

If a veteran died in your town but was buried neither in your town nor in the town shown on the certificate (under item 14) as his town of residence, forward a copy of the certificate to the clerk of the city or town in which the veteran was buried. Use pink Form R-302R as you would in forwarding a copy to the clerk of the town of residence. Fill out the information relating to the veteran's service which appears on the back of the form. [46:12]

A certified copy of the affidavit, required to be filed by the undertaker with the board of health or its agent prior to the issuance of a burial permit for a veteran, should be forwarded to the veterans' graves officer of the city or town of burial or other disposition of the body. (see page 82) If you are the agent of the board of health, you are responsible for forwarding this affidavit. [114: 46A]

NOTE: *You may, if you wish, use the photographic method outlined under V.A. for forwarding copies to other city or town clerks.*

4. Returns to Registrars of Voters [51:14]

The city or town clerk or other officer having charge of the registration of deaths in each city or town shall, on the first day of every month, and also two days before every election, transmit to the registrar of voters (or election commissioners) a list of the names of all residents eighteen years of age or older who died in the preceding month or subsequent to the date of the previously transmitted list, together with a statement of the ward, street and number, if any, where such person resided at the time of his death.

In most towns, the town clerk is also the clerk to the board of registrars so the provisions of 51:14 would not require preparation and transmittal of a separate list of the names and addresses of those who had died. You should, however, note on the voting list and on the affidavit of registration that an individual has died and the date of death. The affidavit of registration should be removed from the active file and, at the next printing, the name should be eliminated from the voting list.

C. FEES FOR FORWARDING COPIES OF RECORDS [46:26]

The following fees shall be paid to town clerks for forwarding copies of death records:

- $1 per record (Forms R-301R, 302R, 306, 307, 308) forwarded to the state registrar after presentation to the town treasurer of a certificate of receipt signed by the state registrar

- 50¢ per record forwarded to the clerk of another town under the provisions of 46:12

- $1 per record for forwarding affidavit of correction or Delayed Return of Death to the clerk of another town

These fees would be paid by the town and would need to be appropriated at town meeting thereby being subject to limitation by the town. Generally a town clerk who is paid partially or fully by appropriated salary is considered to have received the "fees" under Section 26. A town clerk who is paid entirely by fees might be entitled to additional compensation under this section.

VI. PREPARING A CERTIFIED COPY OF A DEATH RECORD [46:19]

A. GENERAL

The record of the town clerk relative to a death shall be prima facie evidence of the facts recorded, but nothing contained in the record of a death which has reference to the question of liability for causing death shall be admissable in evidence. A certificate of such death signed by the town clerk to which the town seal is affixed, shall be admissable as evidence of such record.

Forms to be used in issuing certified copies may be made up by the town or purchased from a commercial supplier. The state registrar does not furnish these forms.

You are required to furnish upon request and the payment of the required fee, a copy of all records not impounded.

B. Amended, Corrected, or Supplemented Records

If you are issuing a certified copy of an amended record, be sure that you enter the information as it has been amended, *not* the original information. You would not be able to use the photographic process to prepare certified copies of amended records. Enter on the copy both the original date of record and the date the original record was amended.

You may issue a copy of the original record which has been amended only upon proper judicial order, or upon request by a person whose official duties, in your opinion, entitle him to the information contained in the original record.

C. LONG FORM

The long form certified copy of a death record usually contains almost all of the information appearing in items 1 through 16b of the Standard Certificate of Death. It also contains information appearing in items 18c, place of disposition, 18d, location, and item 20, cause(s) of death. The long form generally contains the information required to be recorded under 46:1.

It also should include the registered number and the date you received it in your office (date of record). If you use a separate record book the form should also contain the volume and page number of the book in which the death is recorded. (see sample long form, page 101)

In addition, the clerk's certificate must also appear. This certificate must be completed and signed by the clerk or assistant clerk and the town seal affixed. [46:29]

Simply copy the information from the original certificate or from your record book into the appropriate spaces on the form.

The long form certified copy may also be a photostatic copy of the original certificate. If you use this method for issuing certified copies, you may leave space below the copy of the original for your attestation and for the town seal. Add the date the certificate was issued.

FEE: For long form certified copy: $2.00 [262: 34(30)], unless a different fee has been established by your town meeting.

D. ABSTRACT (SHORT FORM) [46:19]

Upon request for an abbreviated record of death, the clerk or assistant clerk shall make an abstract of the record of death without notation thereon of the parent or parents, except by request of the applicant. The abstract generally includes the following information: Name of deceased, age, place of birth, date of birth, place of death, cause of death, and date of record. It may also contain spaces for the volume, page, and registered number. (see sample abstract, page 102)

FEE: For abstract (short form)): $1.00 [262: 34(30A)], unless a different fee has been established by your town meeting.

E. CERTIFIED COPIES OF RECORDS RELATING TO A VETERAN [262:46A]

No fee for a copy of a death record relating to a veteran shall be charged his or her relatives provided that such copy is for use in relation to a claim against the United States or the commonwealth.

F. IMPOUNDED RECORDS [46:2A]

Copies of impounded records (Certificates of Fetal Death and certificates containing the term "stillborn") may *not* be issued to any person except upon proper judicial order, or upon the request of the parent, attorney, guardian, conservator, or a person whose official duties, in the opinion of the town clerk, entitle him to the information contained in such records.

These provisions do not apply to deaths recorded prior to January 1, 1841 and copies of those records may be issued to anyone who requests them.

G. REPRODUCTION OF CERTIFICATES OR RECORDS BY UNAUTHORIZED PERSONS [46:19A]

Reproducing a certified copy of an original record, by any person other than the town clerk, assistant clerk, state registrar, or one of his deputies shall be prohibited.

EXCEPTION: A register of deeds, register of probate, or other county, state, or municipal official keeper of public records may, in the course of his clerical duties, reproduce such certificates or records as are required by his office.

VII. BURIAL PERMITS (Form R-309)

A. REQUIREMENTS FOR OBTAINING

1. General

Every undertaker or other person in charge of a funeral shall return the certificate of death to the board of health or its agent, or, if the selectmen constitute the board of health, to the town clerk of the town in which the death occurred. [46:11]

No undertaker or other person shall bury or otherwise dispose of a human body in a town, or remove from a town a human body which has not been buried, until he has received a permit from the board of health or its agent appointed to issue such permits. If there is no board of health, the permit must be obtained from the clerk of the town in which the person died. [114:45]

NOTE: *Under Rule 40 of the Rules and Regulations of the State Board of Registration in Embalming and Funeral Directing, no burial or removal permit shall be issued to anyone other than a funeral director registered and licensed under the laws of Massachusetts.*

> *The funeral director himself does not need to pick up the burial permit. A member of his organization may present the certificate of death and pick up the burial permit. However, the name of the funeral director or funeral service licensee must have been entered under item 19a on the certificate of death.*

If a permit for the removal of a body, not previously interred, from one town to another within the commonwealth cannot be obtained early enough, the certificate of death in the possession of the undertaker will allow him to remove the body, *provided* that the body shall be returned to the town from which it was removed within 36 hours or a burial or removal permit is obtained within that time. [114:45] This provision covers those cases in which a death occurs at such time that the body must be removed from the place of death when the board of health or town clerk's office is closed. In some towns, the board of health designates the fire or police department as its agent for issuing burial permits as these departments are usually open 24 hours a day and on weekends.

In many towns the town clerk is designated by the board of health as its agent for issuing burial permits and the *following is written as though the clerk were such agent.*

2. Original Interment or Removal from Town in which the Person Died

Before issuing a burial (or removal) permit (Form R-309) for an original interment or for a removal of a body from the town in which the person died, you must receive a satisfactory written statement signed by a physician, hospital medical officer, or a medical examiner. This statement will be a Standard Certificate of Death (Form R-301R).

Check the certificate carefully to be sure that it has been properly prepared and signed. (see Appendix B) Be sure that the information is legible.

a. refusal to issue burial permit

If you are unable to read the information entered on the certificate or if there is missing information, you may refuse to issue the burial permit until the undertaker or physician corrects the problem. In this case, a new certificate should be prepared.

However, your refusals to issue burial permits should be kept to a minimum as a refusal can cause considerable

hardship on the next of kin. Minor errors in the personal data entered by the undertaker can be corrected by him at the time he presents the certificate. Also, obvious typographical errors, such as Botson for Boston, or the misspelling of the name of a town, can also be corrected.

3. Cremation [114:44]

The body of a deceased person shall not be cremated within 48 hours after his death unless he died of a contagious or infectious disease. If the death occurred within the commonwealth, the body shall not be received or cremated by any corporation authorized to cremate bodies until its officers have received the certificate of death or burial permit required by law, *and* a certificate from the medical examiner that he has viewed the body and is of the opinion that no further examination or judicial inquiry is necessary.

The standard burial (or removal) permit (Form R-309) is used in cases of cremation as well as burial, to allow the undertaker to remove the body to the crematory. (see page 103)

If the death occurs outside of the commonwealth, the reception and cremation of the body of a deceased person shall be governed by a bylaw or regulation of the Massachusetts Department of Public Health.

4. Deceased Veterans [114:46A]

No permit for the burial or other disposition of the body of a deceased veteran shall be issued unless and until an affidavit has been filed with the board of health or its agent by the undertaker. (see 31:21 and 4:7(43) for definitions of veteran)

If a certificate of death is complete, a permit may be issued without the affidavit, *provided* the undertaker assures you that the necessary affidavit will be filed as soon as possible. However, you should make sure that he does so.

Information required on the affidavit is as follows:

- name of deceased
- last known address
- date and place of birth
- cause of death
- summary of service record
- detailed statement of the location of burial or other disposition of the body

The name and address of the deceased, the date and place of birth, the cause of death, and the location of burial or other disposition appear on the front of the certificate of death. A summary of the service record appears on the back of the certificate of death.

There are also separate forms entitled "Affidavit for Disposition of Deceased Veteran" which contain additional information such as name and address of nearest kin, date of enlistment, date of discharge, date and place of burial or cremation, and cemetery section, lot and grave numbers. (see page 105 for sample form)

A certified copy of this affidavit shall be transmitted by the board of health or its agent, or by the town clerk to the veterans' graves officer (appointed under 115:9) in the town of burial or disposition of the body. If the deceased veteran was not a resident of the town, the veterans' graves officer shall transmit a copy of the affidavit to the veterans' graves officer of the town of residence of the deceased. If the deceased veteran was not a resident of the commonwealth and was not a resident of the town in which he was buried, the copy of the affidavit shall be transmitted to the veterans' graves officer of the city or town where the deceased veteran last resided.

5. Out-of-State Body not Accompanied by Removal Permit [114:46]

No funeral director or other person shall bury a body or ashes received from outside of the commonwealth when it has *not* been accompanied by a removal permit from the state of origin *until* he has received a Masaschusetts permit for burial.

The permit may be obtained from one of the following:

- the board of health or its agent, or if there is no board of health from the town clerk of the town where the body is to be buried
- the person appointed to have the care of the cemetery or burial ground in which the interment is made, if a record is kept of the names of all persons buried therein
- the duly appointed superintendent of burials who keeps a record of interments in the town in which the interment is to be made

Such permit shall not be issued until the funeral director or other person has delivered a certified copy of the death record giving the following information:

- name of deceased
- age of deceased as nearly as can be ascertained
- cause of death
- the name of the town where the deceased last resided or from which the body was brought
- if death occurred at sea, the name of the vessel upon which it occurred
- any other facts required for record which could be obtained with reasonable diligence, including in case the deceased was a veteran, the war in which veteran served, and the cause(s) of death

The board of health, agent, or other person receiving the certificate shall countersign it and file it in his office. This does *not* establish a death *record*.

6. Burial of Body or Ashes Prohibited without Proper Certificates or Permits [114:47]

No person having the care of a cemetery, burial ground or crematory shall allow the burial, removal, or cremation of a human body until he has received a proper permit. He shall not allow the burial of human ashes until he has received a certificate that the burial permit and the certificate of the medical examiner required prior to cremation have been presented.

After the burial, removal, or cremation of a body, the superintendent or other officer in charge of the cemetery or crematory must complete the coupon attached to the burial permit (section 3 on page 87) by entering the name and location of the cemetery or crematory, the date of burial or cremation, and his signature. The coupon must then be returned to the officer who issued it. The superintendent must retain the burial permit (section 2, page 87) in his files. He must also keep a record of the location of the grave or other receptacle of the body or ashes of the deceased.

If there is no officer in charge of the cemetery or crematory, such duties shall be performed by the undertaker.

7. Certificate Required Prior to Burial of Ashes of Human Body [114:48]

An undertaker shall not bury ashes of a human body until he has received from the person having charge of the cemetery, a certificate that the burial permit and the certificate of the medical examiner prerequisite to the cremation of said body have been duly presented.

B. RECORDING INFORMATION

1. Making Out a Burial (or Removal) Permit (Form R-309)

Burial (or removal) permits are available from the state registrar of vital records and statistics and are made up in books of approximately 100. Each permit contains three sections and each section must be completed. The information required on the permit is contained on the certificate of death which must be presented prior to issuing the burial permit.

At the top right hand corner of each section there is a space for a number. Assign a number in the order in which you make out the permits, the same number appearing on each section of the permit. A convenient numbering system is one that contains the year, such as "80-1," "80-2," etc.

Start by filling out the stub to be retained by you at the left side of the permit as shown on the following page:

STUB OF BURIAL (OR REMOVAL) PERMIT TO BE
RETAINED BY THE OFFICER WHO ISSUED IT

R309. 100M-2-74-091463

1/82 STUB No. 82-1

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Name of Funeral Director - Item #19a on Form R-301R

Name of Deceased Item #1

Age Item #1 years Item #6b months Item 6b days

Place of death Item #4a

Date of death Item #3

Cause of death Item #20 (a), (b), (c)

Interment at Item #18c, 18d

Date permit issued Date you issued permit

Certified by Item #27 M. D.

Refer to Standard Certificate of Death, Form R-301R (page 90) for item numbers entered. This section should remain in your burial permit book. Detach sections 2 and 3, after completing them, and give both of these sections to the undertaker.

R-309 SECTION 2

1/82

The Commonwealth of Massachusetts

JOHN F. X. DAVOREN

SECRETARY OF THE COMMONWEALTH

No. 82-1

OFFICIAL BURIAL (OR REMOVAL) PERMIT

Division of Vital Statistics

(Issued under the provisions of Chapter 114, Section 45, General Laws, Ter. Ed., as amended.)

[This permit can be signed only by the agent of the Board of Health (or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death, printed or typed in durable black ink.]

Your city or town (City or town) date (Date) 19.....

A satisfactory certificate of death having been filed, permission is hereby given to

Item #19a (Name) Item #19c (Address)

for the removal from your city or town, if a removal (To be filled out in case of removal) and the interment

at Item #18c Cemetery in Item #18d, of the

body of Item #1 (Give full name of deceased) who died Item #3 (Month) (Day) 19.....(Year)

age Item #6a years, Item #6b months, Item #6b days.

Cause of death Item #20(a), (b), (c)

If a U. S. War Veteran, specify what war, organization, etc. Item #13

Residence at time of death Item #14

Your signature

(Signature of Agent of Board of Health, or, in towns where there is no Board of Health, of Town Clerk)

R-309 SECTION 3

No. 82-1

BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Your office (Office issuing permit)

City or Town of your city or town Mass.

Name of deceased Item #1

If a U. S. War Veteran, specify what war, organization, etc.

Item #13

Leave endorsement blank - to be filled out

ENDORSEMENT

by and signed by cemetery superintendent

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at ..... (Name of cemetery or crematory) (City or town)

on .....

Certified by ..... (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

After you have filled out the above two sections of the burial permit, detach them from the stub and give them both to the funeral director. You do not fill out the bottom half of section 3 as that is to be filled out by the cemetery superintendent. After his endorsement is made, he should return section 3 to you for filing and retain section 2 for his files as the record required by 114:47. After you have issued the burial permit, sign and date the certificate of death in item #28. Add the title "Agent."

2. Out-of-State Body Accompanied by Burial Permit

Whenever a dead body is brought from another state into the commonwealth for burial, accompanied by a removal permit issued under the laws of the state from which the body is brought, such out-of-state permit shall be received as sufficient authority for burial. The superintendent or person in charge of the cemetery where the burial is to take place shall make the proper endorsements on the out-of-state removal permit and send it to the local board of health or its agent in the city or town where the cemetery is located.

Upon receipt of an out-of-state removal permit, transfer the information onto a Form R-309A, Copy of Official Removal Permit. Form R-309A is prepared by the state registrar in duplicate. The board of health, or you as its agent, should sign both copies of the form. Retain the yellow copy for your files, send the pink copy to the superintendent of the cemetery where the body is buried. The original out-of-state removal permit should be returned to the city or town which issued it. (see sample form, page 104)

VIII. EXHUMING AND MOVING A BODY PREVIOUSLY BURIED [114:45]

No undertaker or other person shall exhume a human body and remove it from a town, from one cemetery to another, or from one grave or tomb (other than receiving tomb) to another in the same cemetery, until he has received a permit from the board of health or its agent or from the clerk of the town where the body is buried.

Prior to issuing a permit for exhuming and moving a body previously buried, a "satisfactory written statement" containing the fact required by law to be returned and recorded must be presented. If the deceased died in your town, or if he or she was a resident of your town at the time of death, the "satisfactory written statement" would be the certificate of death on file and recorded in your office. Other satisfactory written statements might be a statement from the cemetery superintendent identifying the deceased and that he is buried in your town, or the original burial permit on file in your office or with the board of health.

Burial (or removal) permit, Form R-309, should be used as the permit for exhuming and moving a body previously buried.

IX. PENALTIES ON CLERKS

For refusing or neglecting to perform any duty required under Chapter 46 -- fine of not less than $20.00 nor more than $100.00. [46:27]

For causing to be published any information relative to the parents of a child born dead -- not more than $100.00 forfeited to the mother of the child. [46:24] These records would be either Form R-304 or those on which "stillborn" appears.

Form R-301R

1/82

(INSTRUCTIONS ON REVERSE SIDE)
FOR USE BY PHYSICIANS AND MEDICAL EXAMINERS

The Commonwealth of Massachusetts

STANDARD CERTIFICATE OF DEATH
REGISTRY OF VITAL RECORDS AND STATISTICS

REGISTERED NUMBER: 143

STATE USE ONLY

STATE USE ONLY
1.
72 PLACE 74
75 HOSPITAL 78
2.
9 RACE
19 NATIVITY 20
32 RESIDENCE 34
OUT OF STATE 35 37
38 CENSUS 41
42 AUTOPSY
43 MED. EXAM

DECEDENT

1. DECEDENT NAME — FIRST: John; MIDDLE: Frederick; LAST: Doe
2. SEX: Male
3. DATE OF DEATH (Mo Day Yr): December 30, 1981
4a. PLACE OF DEATH (CITY OR TOWN): Smalltown
4b. COUNTY OF DEATH: Midshire
4c. HOSPITAL OR OTHER INSTITUTION - Name (If not in either give street and number): Pondville Hospital
4d. IF IN HOSPITAL D.O.A. (Yes or No): No
5. RACE (e.g. White, Black, American Indian, etc.) (Specify): White
6a. AGE (Last Birthday) (Yrs.): 73
6b. UNDER 1 YEAR — MOS / DAYS
6c. UNDER 1 DAY — HOURS / MINS
7. DATE OF BIRTH (Mo Day Yr): April 7, 1908
8. STATE OF BIRTH (If not in U.S.A. name country): Massachusetts
9. MARRIED, NEVER MARRIED, WIDOWED OR DIVORCED: widowed
10. SPOUSE (If wife give maiden name): Mary Jane Somebody
11a. USUAL OCCUPATION (Prior - If Retired): Mechanic
11b. KIND OF BUSINESS OR INDUSTRY: Indus, Manufacturing
12. SOCIAL SECURITY NUMBER: 003-01-2222
13. IF U.S. WAR VETERAN SPECIFY WAR: WW II
14. RESIDENCE STREET AND NUMBER CITY OR TOWN COUNTY STATE ZIP CODE: 52 North, St., Smalltown, Midshire, MA 02056
15a. FATHER FULL NAME: Frederick J. Doe
15b. STATE OF BIRTH (If not in U.S.A. name country): MA
16a. MOTHER NAME (GIVEN) MAIDEN: Sarah Person
16b. STATE OF BIRTH (If not in U.S.A. name country): MA

INFORMANT

17a. INFORMANT NAME AND ADDRESS: John F. Doe, Jr., 11 Maine St., Someplace, MA
17b. RELATIONSHIP: Son

DISPOSITION

18a. TYPE OF DISPOSITION (Specify Burial, Cremation, Other): Burial
18b. DATE OF DISPOSITION: Jan. 4, 1982
18c. PLACE OF DISPOSITION AND LOCATION CITY OR TOWN STATE: Peaceful Acres, Smalltown, MA
19a. FUNERAL SERVICE LICENSEE: I. Dunnimin
19b. NAME OF FACILITY: Dunnimin Funeral Home
19c. ADDRESS OF FACILITY: 2 South St., Smalltown, MA

CAUSE OF DEATH

20. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) (PRINT OR TYPE LEGIBLY)

PART I
(a) Hepatic failure — Interval between onset and death: 5 days
DUE TO OR AS A CONSEQUENCE OF
(b) Metastatic Melanoma to liver — Interval between onset and death: 4 months
DUE TO OR AS A CONSEQUENCE OF
(c) Primary Melanoma to scalp — Interval between onset and death: 11 years

PART II — OTHER SIGNIFICANT CONDITIONS (Conditions contributing to death but not related to cause given in Part I(a)): Asciter/Pleural effusion - felt related to tumor
21. AUTOPSY (Yes or No): No
22. WAS CASE REFERRED TO MED. EXAM (Yes or No): No

23. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)
24a. DATE OF INJURY (Mo Day Yr)
24b. HOUR OF INJURY
24c. DESCRIBE HOW INJURY OCCURRED
24d. INJURY AT WORK (Specify Yes or No)
24e. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)
24f. LOCATION STREET CITY OR TOWN STATE

CERTIFIER

To be Completed by CERTIFYING PHYSICIAN Only

25a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title): W. E. Heal
25b. DATE SIGNED (Mo Day Yr): Dec. 30, 1981
25c. HOUR OF DEATH: 9:50 A. M.
25d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)

To be Completed by MEDICAL EXAMINER Only

26a. On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title):
26b. DATE SIGNED (Mo Day Yr)
26c. HOUR OF DEATH
26d. PRONOUNCED DEAD (Mo Day Yr) ON
26e. PRONOUNCED DEAD (Hour) AT

27. NAME AND ADDRESS OF CERTIFYING PHYSICIAN OR MEDICAL EXAMINER (Type or Print): W. E. Heal, M.D., 12 Joy St., Pleasantville, MA

BLACK INK ONLY

R-301R

28. BURIAL PERMIT ISSUED ON (DATE): Dec 31, 1981
SIGNATURE BD HEALTH AGT: Alice White

29. RECEIVED IN THE CITY OR TOWN OF: Smalltown
CLERK'S SIGNATURE: Carole L. Smith
(DATE RECEIVED): Dec. 31, 1981

Form R-302R

FOR USE BY PHYSICIANS AND MEDICAL EXAMINERS 1/82

INSTRUCTIONS HERE (|) AND ON REVERSE SIDE

ITEM #'s 1 to 19 to be completed ONLY by funeral director.
ITEM #'s 20 to 27 to be completed by certifier.
CERTIFIER to complete ITEM #'s 1R to 4R on REVERSE side.
ALL ITEMS MUST BE LEGIBLY PRINTED OR TYPEWRITTEN IN BLACK INK.

The Commonwealth of Massachusetts

STANDARD CERTIFICATE OF DEATH
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

REGISTERED NUMBER: 2

STATE USE ONLY

DECEDENT

1 DECEDENT - NAME: FIRST: Franklin | MIDDLE: Richard | LAST: Lightfoot

2 SEX: Male

3 DATE OF DEATH (Mo., Day, Yr.): January 2, 1982

4a PLACE OF DEATH (CITY OR TOWN): Smalltown

4b COUNTY OF DEATH: Midshire

4c HOSPITAL OR OTHER INSTITUTION - Name (If not in either, give street and number): 49 Front Street

4d DOA (Yes or No): No

5 RACE - (e.g. White, Black, American Indian, etc.) (Specify): Indian

6a AGE - Last Birthday (Yrs.): 81

6b UNDER 1 YEAR: MOS / DAYS

6c UNDER 1 DAY: HOURS / MINS

7 DATE OF BIRTH (Mo., Day, Yr.): Feb. 20, 1900

8 STATE OF BIRTH (If not in U.S.A., name country): Oklahoma

9 MARRIED, NEVER MARRIED, WIDOWED OR DIVORCED: Never Married

10 SURVIVING SPOUSE (If wife, give maiden name):

11a USUAL OCCUPATION (Prior - If Retired): Riveter

11b KIND OF BUSINESS OR INDUSTRY: Construction

12 SOCIAL SECURITY NUMBER: 001-01-1111

13 IF U.S. WAR VETERAN, SPECIFY WAR: WW I

14 RESIDENCE - STREET AND NUMBER, CITY OR TOWN, COUNTY, STATE, ZIP CODE: 63 First St., Largetown, MA 01234

15a FATHER - FULL NAME: James Lightfoot

15b STATE OF BIRTH (If not in U.S.A., name country): Oklahoma

16a MOTHER - NAME (GIVEN) MAIDEN: Sadie Jane Booth

16b STATE OF BIRTH (If not in U.S.A., name country): Texas

INFORMANT

17a INFORMANT - NAME AND ADDRESS: Arthur F. Jones, 63 First St., Largetown, MA

17b RELATIONSHIP: nephew

DISPOSITION

18a TYPE OF DISPOSITION (Specify Burial, Cremation, Other): Cremation

18b DATE OF DISPOSITION: Jan. 4, 1982

18c PLACE OF DISPOSITION: Woodlawn Crem.

18d LOCATION - CITY OR TOWN - STATE: Smalltown, MA

19a FUNERAL SERVICE LICENSEE Or Person Acting As Such: Brant K. Grimm

19b NAME OF FACILITY: Grimm Funeral Home

19c ADDRESS OF FACILITY: 5 Main St., Smalltown, MA

CAUSE OF DEATH

20 IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) (PRINT OR TYPE LEGIBLY)

PART I

(a) Acute mycardial infarction — Interval between onset and death: 1 hour

DUE TO, OR AS A CONSEQUENCE OF

(b) Chronic renal disease — Interval between onset and death: Years

DUE TO, OR AS A CONSEQUENCE OF

(c) Arteriosclerotic heart disease — Interval between onset and death: Years

PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause given in Part I(a)

21 AUTOPSY (Yes or No): No

22 WAS CASE REFERRED TO MED. EXAM (Yes or No): Yes

23 ACC., SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify):

24a DATE OF INJURY (Mo., Day, Yr.):

24b HOUR OF INJURY:

24c DESCRIBE HOW INJURY OCCURRED:

24d INJURY AT WORK (Specify Yes or No):

24e PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify):

24f LOCATION - STREET - CITY OR TOWN - STATE:

CERTIFIER

To be Completed by CERTIFYING PHYSICIAN Only

25a To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.

(Signature and Title) ▶

25b DATE SIGNED (Mo., Day, Yr.):

25c HOUR OF DEATH:

25d NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print):

To be Completed by MEDICAL EXAMINER Only

26a On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated.

(Signature and Title) ▶ Barry P. Dunn, M.D.

26b DATE SIGNED (Mo., Day, Yr.): Jan 2. 1982

26c HOUR OF DEATH: 1:50 A M

26d PRONOUNCED DEAD (Mo., Day, Yr.): ON Jan 2, 1982

26e PRONOUNCED DEAD (Hour): AT 1:50 A M

27 NAME AND ADDRESS OF CERTIFYING PHYSICIAN OR MEDICAL EXAMINER (Type or Print): Barry P. Dunn, M. D., 115 Lincoln St., Overtown, MA

28 DATE FILED: January 4, 1982

A TRUE COPY ATTEST: Carole L Smith [Smalltown]
(Registrar or Clerk where death occurred)

29 RECEIVED AND FILED: February 12 19 82

Mary K. O'Reilly [Largetown]
(Registrar or Clerk where deceased resided)

R302R
50M-1/80

FOR INFORMATION ONLY
OLD FORM R-302

The Commonwealth of Massachusetts

FORM R-302

MARGIN RESERVED FOR BINDING

WRITE PLAINLY, WITH UNFADING BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON — THIS IS A PERMANENT RECORD

Copies of returns of deaths which occurred in your city or town in case the deceased resided in another city or town at the time of death should be transmitted on Form R-302 to the clerk of the city or town in which the deceased resided as soon as possible, after the close of the month in which the death occurred. (See Chap. 44, Sec. 12, G. L.)

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

(City or Town making this return)

COPY OF CERTIFICATE OF DEATH

Registered No. .....

1 PLACE OF DEATH: (County) ..... (City or Town) .....

No. ..... St. { (If death occurred in a hospital or institution, give its NAME instead of street and number) PHYSICIAN—IMPORTANT

2 FULL NAME ..... (If deceased is a married, widowed or divorced woman, give also maiden name.) { (If deceased a U. S. War Veteran, specify WAR) .....

(a) Permanent Residence. No. ..... St. ..... (City or town and State)

MEDICAL CERTIFICATE OF DEATH

3 DATE OF DEATH ..... (Month) (Day) (Year)

4 I HEREBY CERTIFY, that I attended deceased from ....., 19 ....., to ....., 19 .....

I last saw h..... alive on ....., 19 ....., death is said to have occurred on the date stated above, at ..... m.

DEATH WAS CAUSED BY: IMMEDIATE CAUSE	INTERVAL BETWEEN ONSET AND DEATH
(a)	
Due To (b)	
Due To (c)	
OTHER SIGNIFICANT CONDITIONS	

Was autopsy performed? .....

What test confirmed diagnosis? .....

5 Was disease or injury in any way related to occupation of deceased? .....

If so, specify .....

(Attending Physician) ....., M.D.

(Address) ..... Date ..... 19.....

6 .....
Place of Burial or Cremation (City or Town)

DATE OF BURIAL ..... 19.....

7 NAME OF FUNERAL DIRECTOR .....

ADDRESS .....

8 Informant .....

(Address) .....

PERSONAL AND STATISTICAL PARTICULARS

9 SEX	10 COLOR	11 SINGLE (write the word) MARRIED WIDOWED DIVORCED UNKNOWN

12 If married, widowed, or divorced
HUSBAND of ..... (Give maiden name of wife in full)
(or) WIFE of ..... (Husband's name in full)

13 AGE ..... Years ..... Months ..... Days | If under 24 hours .....Hours .....Minutes

14 Usual Occupation ..... (Kind of work done during most of working life)

15 Industry or Business

16 Social Security No.

17 BIRTHPLACE (City) (State or country)

PARENTS

18 NAME OF FATHER

19 BIRTHPLACE OF FATHER (City) ..... (State or country)

20 MAIDEN NAME OF MOTHER

21 BIRTHPLACE OF MOTHER (City) ..... (State or country)

A TRUE COPY

ATTEST: ..... (Registrar or Clerk where death occurred)

DATE FILED ..... 19.....

Received and filed ..... 19.....

..... (Registrar or Clerk where deceased resided)

Form R-302 30M-2-77-129324

Form 303

To be filed for burial permit with Board of Health or its Agent.

NOTE: CHAPTER 137, ACTS OF 1954, REQUIRES PHYSICIANS TO PRINT OR TYPE THE CAUSE OR CAUSES OF DEATH ON DEATH CERTIFICATES.

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. MEDICAL EXAMINERS should state CAUSE AND MANNER OF DEATH in plain terms, so that it may be properly classified under the International Classification of Causes of Death. See reverse side for additional information. See also Chap. 31, §§ 1, 27, Chap. 46, §§ 9, 10, Chap. 114, §§ 44-48.

If deceased was a U. S. War Veteran, G.L. Chap. 46, Section 10, requires physicians to insert a recital to that effect.

50M-11/77 PHR

PLACE OF DEATH

1 FOR INFORMATION ONLY
OLD FORM R-303
(County) .....
(City or Town) .....

The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF
VITAL RECORDS AND STATISTICS

MEDICAL EXAMINER'S CERTIFICATE OF DEATH

(City or Town making this return)

Registered No. .....

No. ..... St {(If death occurred in a hospital or institution, give its NAME instead of street and number)

2 FULL NAME
(If deceased is a married, widowed or divorced woman, give also maiden name.)

PHYSICIAN — IMPORTANT
{(Was deceased a U. S. War Veteran, if so specify WAR)

(a) Permanent Residence No ..... St.
(City or town and State)

MEDICAL CERTIFICATE OF DEATH

3 DATE OF DEATH .....
(Month) (Day) (Year)

4 I HEREBY CERTIFY that I have investigated the death of the person above-named and that the CAUSE AND MANNER thereof are as follows (If an injury was involved, state fully.)

.....

.....

.....

.....

5 Accident, suicide, or homicide (specify) .....

Date and hour of injury ..... 19 .....

IF ACCIDENTAL, was injury causally related to the death? .....

Where did Injury occur? .....
(City or town and State)

Did injury occur in or about home, on farm, in industrial place, or in public place? ..... While at work? .....
(Specify type of place)

Manner of Injury .....
(How did injury occur?)

Nature of Injury .....

Was autopsy performed? .....

Was disease or injury in any way related to occupation of deceased? .....

If so, specify .....

(Signed) ....., M D
(Print or Type Name)

(Address) ..... Date ..... 19 .....

6

Place of Burial or Cremation ..... (City or Town)

DATE ..... 19 .....

7 NAME OF FUNERAL DIRECTOR .....

ADDRESS .....

8 Informant .....

(Address) .....

PERSONAL AND STATISTICAL PARTICULARS

9 SEX	10 COLOR	11 SINGLE MARRIED WIDOWED DIVORCED UNKNOWN (write the word)

12 If married, widowed, or divorced
HUSBAND of .....
(Give maiden name of wife in full)
(or) WIFE of .....
(Husband's name in full)

13 AGE ..... Years ..... Months ..... Days | If under 24 hours ..... Hours ..... Minutes

14 Usual Occupation .....
(Kind of work done during most of working life)

15 Industry or Business .....

16 Social Security No. .....

17 BIRTHPLACE (City) .....
(State or country)

PARENTS

18 NAME OF FATHER .....

19 BIRTHPLACE OF FATHER (City) .....
(State or country)

20 MAIDEN NAME OF MOTHER .....

21 BIRTHPLACE OF MOTHER (City) .....
(State or country)

22 I HEREBY CERTIFY that a satisfactory standard certificate of death was filed with me BEFORE the burial or transit permit was issued.

.....
(Signature of Agent Board of Health or other)

(Official Designation) (Date of Issue of Permit)

23
Received and filed ..... 19 .....

(Clerk or Registrar)

1/82

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

REPORT OF FETAL DEATH

STATE FILE NUMBER

MOTHER

HOSPITAL - NAME (If not in hospital give street and number) 1a	CITY TOWN OR LOCATION OF DELIVERY 1b	COUNTY OF DELIVERY 1c
DATE OF DELIVERY (Month Day Year) 2a	HOUR OF DELIVERY 2b	SEX OF FETUS 3
WEIGHT OF FETUS 4		
MOTHER - MAIDEN NAME FIRST MIDDLE LAST 5a	AGE (At time of this delivery) 5b	RESIDENCE - STATE 6a
COUNTY 6b		
CITY TOWN OR LOCATION 6c	STREET AND NUMBER 6d	

RACE - (e.g. White, Black American Indian etc.) (Specify) 7	EDUCATION (Specify only highest grade completed) Elementary or Secondary (0-12) 8	College (1-4 or 5+)	DATE LAST NORMAL MENSES BEGAN (Month Day Year) 9	IS MOTHER MARRIED? (Specify yes or no) 10

PREGNANCY HISTORY (Complete each section)

LIVE BIRTHS		OTHER TERMINATIONS (Spontaneous and Induced)	
11a Now living Number ____ None ☐	11b Now dead Number ____ None ☐	11d Before 20 weeks Number ____ None ☐	11e After 20 weeks Number ____ None ☐ (Do not include this fetus)

MONTH OF PREGNANCY PRENATAL CARE BEGAN First second etc. (Specify) 12a	PRENATAL VISITS - Total number (If none so state) 12b	THIS BIRTH - Single twin, triplet, etc. (Specify) 13a	IF NOT SINGLE BIRTH - Born 1st 2nd 3rd etc. (Specify) 13b	DATE OF LAST LIVE BIRTH (Month Year) 11c	DATE OF LAST OTHER TERMINATION (as indicated in d or e above) (Month Year) 11f

FATHER

FATHER - NAME FIRST MIDDLE LAST 14a	AGE (At time of this delivery) 14b	RACE - (e.g. White, Black American Indian etc.) (Specify) 14c	EDUCATION (Specify only highest grade completed) Elementary or Secondary (0-12) 14d	College (1-4 or 5+)

CAUSE OF FETAL DEATH

15 PART I — Fetal or maternal condition directly causing fetal death — IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a) (b) AND (c).) 1a ____ Specify Fetal or Maternal

Fetal and/or maternal conditions if any giving rise to the immediate cause (a) stating the underlying cause last

DUE TO OR AS A CONSEQUENCE OF 1b ____ Specify Fetal or Maternal

DUE TO OR AS A CONSEQUENCE OF 1c ____ Specify Fetal or Maternal

PART II OTHER SIGNIFICANT CONDITIONS OF FETUS OR MOTHER Conditions contributing to fatal death but not related to cause given in 1a	FETUS DIED BEFORE LABOR DURING LABOR OR DELIVERY UNKNOWN (Specify) 16	PHYSICIAN'S ESTIMATE OF GESTATION 17 Weeks	AUTOPSY (Specify yes or no) 18

COMPLICATIONS OF PREGNANCY (Describe or write none) 19	COMPLICATIONS OF LABOR AND/OR DELIVERY (Describe or write none) 20
CONCURRENT ILLNESSES OR CONDITIONS AFFECTING THE PREGNANCY (Describe or write none) 21	CONGENITAL MALFORMATIONS OR ANOMALIES OF FETUS (Describe or write none) 22
NAME OF PHYSICIAN OR ATTENDANT (Type or print) 23	NAME OF PERSON COMPLETING REPORT (Type or print) TITLE 24

DISPOSITION

BURIAL, CREMATION, OR BY HOSPITAL 25	CEMETERY OR CREMATORY - NAME OR WRITE "NONE" 26	LOCATION CITY OR TOWN STATE 26a
NAME OF FUNERAL DIRECTOR (IF ANY) 27	NAME OF FACILITY (Hospital or Funeral Home) 28	ADDRESS OF FACILITY 28a

CERTIFIER

I HEREBY CERTIFY that this delivery occurred on the date stated and product of conception was not a live birth.

Signature of Attending Physician or Medical Examiner ____ TITLE

DEFINITION: "Fetal death" per chapter 111 section 202 of the M.G.L. means death prior to the complete expulsion or extraction from its mother of a fetus, irrespective of the duration of pregnancy, as indicated by the fact that after such expulsion or extraction the fetus does not breathe or show any other evidence of life such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles. A fetal death does **NOT** include an induced abortion as defined in section 12K of chapter 112 of M.G.L.. Spontaneous abortions are to be included.

TO BE REPORTED: Only fetal deaths of twenty weeks or more gestation or of a weight of 350 grams or more are to be reported.

INSTRUCTIONS: Return completed reported within 10 days to the Registry of Vital Records and Statistics, Rm. 107 McCormack Bldg., 1 Ashburton Pl., Boston, Ma. 02108

FORM R-304-3M - 7/78 cpr

FORM R-305

MARGIN RESERVED FOR BINDING

WRITE PLAINLY, WITH UNFADING BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON — THIS IS A PERMANENT RECORD

Copies of returns of deaths which occurred in your city or town in case the deceased resided in another city or town at the time of death should be transmitted on Form R-305 to the clerk of the city or town in which the deceased resided as soon as possible after the close of the month in which the death occurred (See Chap. 46, Sec. 12, G. L.)

5M-10-76-129128

PLACE OF DEATH

1 FOR INFORMATION ONLY
OLD FORM R-305

(County)

(City or Town)

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

COPY OF MEDICAL EXAMINER'S CERTIFICATE OF DEATH

(City or Town making this return)

Registered No. .....

No. ..... St. {(If death occurred in a hospital or institution, give its NAME instead of street and number)

2 FULL NAME ..... {PHYSICIAN — IMPORTANT (Was deceased a U. S. War Veteran, if so specify WAR) .....
(First Name) (Middle Name) (Last Name)
(If deceased is a married, widowed or divorced woman, give also maiden name)

(a) Permanent Residence. No. ..... St .....
(City or town and State)

MEDICAL CERTIFICATE OF DEATH

3 DATE OF DEATH ..... (Month) (Day) (Year)

4 I HEREBY CERTIFY that I have investigated the death of the person above-named and that the CAUSE AND MANNER thereof are as follows: (If an injury was involved, state fully.)

.....

.....

.....

.....

5 Accident, suicide, or homicide (specify) .....

Date and hour of injury ..... 19 .....

IF ACCIDENTAL, was injury causally related to the death? .....

Where did Injury occur? ..... (City or town and State)

Did injury occur in or about home, on farm, in industrial place, or in public place? ..... While at work?... (Specify type of place)

Manner of Injury ..... (How did injury occur?)

Nature of Injury .....

Was autopsy performed? .....

Was disease or injury in any way related to occupation of deceased? .....

If so, specify .....

(Signed) ....., M. D.

(Print or Type Name)

(Address) ..... Date .....19.....

6

Place of Burial or Cremation (City or Town)

DATE .....19.....

7 NAME OF FUNERAL DIRECTOR .....

ADDRESS .....

8 Informant .....

(Address) .....

PERSONAL AND STATISTICAL PARTICULARS

9 SEX	10 COLOR	11 SINGLE (write the word) MARRIED WIDOWED DIVORCED UNKNOWN

12 If married, widowed, or divorced
HUSBAND of .....
(Give maiden name of wife in full)
(or) WIFE of .....
(Husband's name in full)

13 AGE ... YEARS ... MONTHS ... Days | If under 24 hours .....Hours .....Minut

14 Usual Occupation .....
(Kind of work done during most of working life)

15 Industry or Business .....

16 Social Security No.

17 BIRTHPLACE (City) (State or country)

PARENTS

18 NAME OF FATHER

19 BIRTHPLACE OF FATHER (City) (State or country) .....

20 MAIDEN NAME OF MOTHER

21 BIRTHPLACE OF MOTHER (City) (State or country) .....

A TRUE COPY

ATTEST: .....
(Clerk or Registrar of City or Town where death occurred)

DATE FILED .....19.....

Received and filed .....19.....

.....
(Clerk or Registrar of City or Town where deceased resided)

1/82

The Commonwealth of Massachusetts

AFFIDAVIT AND CORRECTION OF RECORD OF DEATH
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

REGISTERED NUMBER: 104 Dep. No. 82-5

STATE USE ONLY

Form R-306-6M

DECEDENT

1. DECEDENT NAME — FIRST: Alfred — MIDDLE: Douglas — LAST: Black
2. SEX: Male
3. DATE OF DEATH (Mo. Day Yr.): October 14, 1981
4a. PLACE OF DEATH (CITY OR TOWN): Smalltown
4b. COUNTY OF DEATH: Midshire
4c. HOSPITAL OR OTHER INSTITUTION - Name (If not in either, give street and number): Community Hospital
4d. D.O.A. (Yes or No): No
5. RACE (e.g. White, Black, American Indian, etc.) (Specify): White
6a. AGE - Last Birthday (Yrs.): 81
6b. UNDER 1 YEAR — MOS. / DAYS
6c. UNDER 1 DAY — HOURS / MINS.
7. DATE OF BIRTH (Mo. Day Yr.): August 2, 1900
8. STATE OF BIRTH (If not in U.S.A. name country): Massachusetts
9. MARRIED, NEVER MARRIED, WIDOWED OR DIVORCED: widowed
10. SURVIVING SPOUSE (If wife, give maiden name): Mary R. Jones
11a. USUAL OCCUPATION (Prior to Retired): Salesman
11b. KIND OF BUSINESS OR INDUSTRY: Insurance Co.
12. SOCIAL SECURITY NUMBER: 002-44-5967
13. IF U.S. WAR VETERAN SPECIFY WAR: WW II
14. RESIDENCE - STREET AND NUMBER, CITY OR TOWN, COUNTY, STATE, ZIP CODE: 60 W. Main Street, Largetown, NH

15a. FATHER FULL NAME: Douglas A. Black
15b. STATE OF BIRTH (If not in U.S.A. name country): MA
16a. MOTHER NAME (GIVEN) MAIDEN: Carol P. Smythe
16b. STATE OF BIRTH (If not in U.S.A. name country): NH

INFORMANT

17a. INFORMANT NAME AND ADDRESS: Susan T. Black, 60 W. Main St., Largetown, NH
17b. RELATIONSHIP: daughter

DISPOSITION

18a. TYPE OF DISPOSITION (Specify Burial, Cremation, Other): burial
18b. DATE OF DISPOSITION: Oct. 16, 1981
18c. PLACE OF DISPOSITION: Fairlawn Cem.
18d. LOCATION — CITY OR TOWN, STATE: Largetown, NH
19a. FUNERAL SERVICE LICENSEE Or Person Acting As Such: I Dunnimin
19b. NAME OF FACILITY: Dunnimin Funeral Home
19c. ADDRESS OF FACILITY: 2 South St., Smalltown MA

CAUSE OF DEATH

20. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b) AND (c).) (PRINT OR TYPE LEGIBLY)
PART I
(a) Diabetes Mellitus — Interval between onset and death: 10 years
DUE TO OR AS A CONSEQUENCE OF
(b) Atherosclerostic Heart Disease — Interval between onset and death: 7 years
DUE TO OR AS A CONSEQUENCE OF
(c) Cerebral Arteriosclerosis — Interval between onset and death: 5 years

PART II — OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause given in Part I(a)
21. AUTOPSY (Yes or No): No
22. WAS CASE REFERRED TO M.E. OFFICE (Yes or No): No

23. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)
24a. DATE OF INJURY (Mo. Day Yr.)
24b. HOUR OF INJURY
24c. DESCRIBE HOW INJURY OCCURRED
25a. INJURY AT WORK (Specify Yes or No)
25b. PLACE OF INJURY (At home, farm, street, factory, office building, etc. Specify)
25c. LOCATION — STREET — CITY OR TOWN — STATE

CERTIFIER

To be Completed by CERTIFYING PHYSICIAN Only:
26a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) ▶ S/ W.E. Heal, M.D.
26b. DATE SIGNED (Mo. Day Yr.): Oct. 14, 1981
26c. HOUR OF DEATH: 9:45 P M
26d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)

To be Completed by MEDICAL EXAMINER Only:
27a. On the basis of examination, and investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) ▶
27b. DATE SIGNED (Mo. Day Yr.)
27c. HOUR OF DEATH
27d. PRONOUNCED DEAD (Mo. Day Yr.)
27e. PRONOUNCED DEAD (Hour)

28. DEPONENT - NAME AND ADDRESS: Susan T. Black, 60 W. Main St., Largetown, NH
29a. DATE OF ORIGINAL RECORD: October 16, 1981

R-306-6M

30. I HEREBY CERTIFY that a satisfactory standard certificate of death was filed with me BEFORE the burial or transit permit was issued.
(SIGNATURE, TITLE): s/ Alice White, Agent
(DATE ISSUED): Oct. 15, 1981
31. RECEIVED IN CITY OR TOWN OF: Smalltown
(CLERK'S SIGNATURE): Carole L. Smith
(DATE RECEIVED): Apr 5, 198

DEPOSITION

WRITE LEGIBLY WITH DURABLE BLACK INK

The Commonwealth of Massachusetts
County of Midshire } ss.:

The undersigned, being duly sworn, depose and say that the record relating to the death of Alfred Douglas Black (Give name of decedent exactly as recorded on the original record) in the town (City or town) of Smalltown (Name of city or town), does not fully and correctly state all the facts relating to said death, and that the true statement of facts omitted or incorrectly stated in said record has been supplied by Susan T. Black on the form or certificate on the other side of this blank.

REVERSE SIDE

SIGNATURE	RESIDENCE (City or town, street and number, if any)	Relation to decedent, if any
Susan T. Black	60 W. Main St., Largetown NH	daughter

FURTHER, The written evidence submitted to substantiate the affidavit was:

Certified copy of birth record of Carol P. Smythe from Goffstown, NH.

Date April 5, 1982

Then personally appeared before me the person whose signature appear above and made oath that the statements subscribed to by her are true.

Name Carole L. Smith

Official designation Town Clerk
(City or town clerk, or Assistant Clerk)

MARGIN RESERVED FOR BINDING

Form R-301R

FOR USE BY PHYSICIANS AND MEDICAL EXAMINERS

ORIGINAL CERTIFICATE
AFTER CORRECTION

INSTRUCTIONS HERE ( ) AND ON REVERSE SIDE

The Commonwealth of Massachusetts

STANDARD CERTIFICATE OF DEATH
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

REGISTERED NUMBER: 104

STATE USE ONLY

ITEM #'s 1 to 19 to be completed ONLY by funeral director
ITEM #'s 20 to 27 to be completed by certifier.
CERTIFIER to complete ITEM #'s 1R to 4R on REVERSE side.
ALL ITEMS MUST BE **LEGIBLY** PRINTED OR TYPEWRITTEN IN **BLACK INK.**

DECEDENT

1. DECEDENT - NAME: FIRST: Alfred; MIDDLE: Douglas; LAST: Black
2. SEX: Male
3. DATE OF DEATH (Mo Day Yr): October 14, 1981
4a. PLACE OF DEATH (CITY OR TOWN): Smalltown
4b. COUNTY OF DEATH: Midshire
4c. HOSPITAL OR OTHER INSTITUTION Name (If not in either give street and number): Community Hospital
4d. D.O.A. (Yes or No): No
5. RACE (e.g. White Black American Indian etc.) (Specify): White
6a. AGE - Last Birthday (Yrs.): 81
6b. UNDER 1 YEAR MOS / DAYS
6c. UNDER 1 DAY HOURS / MINS
7. DATE OF BIRTH (Mo Day Yr.): August 2, 1900
8. STATE OF BIRTH (If not in U.S.A. name country): Massachusetts
9. MARRIED NEVER MARRIED WIDOWED OR DIVORCED: widowed
10. SURVIVING SPOUSE (If wife give maiden name): Mary R. Jones
11a. USUAL OCCUPATION (Prior - If Retired): Salesman
11b. KIND OF BUSINESS OR INDUSTRY: Insurance Co.
12. SOCIAL SECURITY NUMBER: 002-44-5967
13. IF U.S. WAR VETERAN SPECIFY WAR: WW II
14. RESIDENCE - STREET AND NUMBER CITY OR TOWN COUNTY STATE ZIP CODE: 60 W. Main Street, Largetown, NH
15a. FATHER - FULL NAME: Douglas A. Black
15b. STATE OF BIRTH (If not in U.S.A. name country): MA
16a. MOTHER - NAME (GIVEN) MAIDEN: Carol P. ~~Smith~~ Smythe
16b. STATE OF BIRTH (If not in U.S.A. name country): ~~MA~~ N.H. *

Dept No. 82-5

INFORMANT

17a. INFORMANT - NAME AND ADDRESS: Susan T. Black, 60 W. Main St., Largetown, NH
17b. RELATIONSHIP: daughter

DISPOSITION

18a. TYPE OF DISPOSITION (Specify Burial Cremation Other): Burial
18b. DATE OF DISPOSITION: Oct. 16, 1981
18c. PLACE OF DISPOSITION: Fairlawn Cem.
19. LOCATION CITY OR TOWN STATE: Largetown, NH
19a. FUNERAL SERVICE LICENSEE Or Person Acting As Such: I Dunnimin
19b. NAME OF FACILITY: Dunnimin Funeral Home
19c. ADDRESS OF FACILITY: 2 South St., Smalltown MA

CAUSE OF DEATH

20. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) (PRINT OR TYPE LEGIBLY)

PART I
(a) Diabetes Mellitus — Interval between onset and death: 10 years
DUE TO OR AS A CONSEQUENCE OF
(b) Atherosclerotic Heart Disease — Interval between onset and death: 7 years
DUE TO OR AS A CONSEQUENCE OF
(c) Cerebral Arteriosclerosis — Interval between onset and death: 5 years

PART II OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause given in Part I(a)

21. AUTOPSY (Yes or No): NO
22. WAS CASE REFERRED TO MED. EXAM (Yes or No): NO

23. ACC. SUICIDE HOM. UNDET. OR PENDING INVEST. (Specify)
24a. DATE OF INJURY (Mo Day Yr.)
24b. HOUR OF INJURY
24c. DESCRIBE HOW INJURY OCCURRED
24d. INJURY AT WORK (Specify Yes or No)
24e. PLACE OF INJURY - At home farm street factory, office building etc. (Specify)
24f. LOCATION STREET CITY OR TOWN STATE

CERTIFIER

To be Completed by CERTIFYING PHYSICIAN Only

25a. To the best of my knowledge death occurred at the time date and place and due to the cause(s) stated
Signature and Title: W E Heal M.D.
25b. DATE SIGNED (Mo Day Yr.): Oct. 14, 1981
25c. HOUR OF DEATH: 9:45 P M
25d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)

To be Completed by MEDICAL EXAMINER Only

26a. On the basis of examination and/or investigation in my opinion death occurred at the time date and place and due to the cause(s) stated
Signature and Title:
26b. DATE SIGNED (Mo Day Yr.)
26c. HOUR OF DEATH M
26d. PRONOUNCED DEAD (Mo Day Yr.) ON
26e. PRONOUNCED DEAD (Hour) AT M

27. NAME AND ADDRESS OF CERTIFYING PHYSICIAN OR MEDICAL EXAMINER (Type or Print)
W. E. Heal, M.D. 12 Joy St. Pleasantville, MA

I HEREBY CERTIFY that a satisfactory standard certificate of death was filed with me BEFORE the burial or transit permit was issued.
(SIGNATURE TITLE) Alice White, Agent
DATE ISSUED: Oct. 15, 1981

29. RECEIVED AND FILED IN THE CITY OR TOWN OF: Smalltown
(CLERK'S SIGNATURE) Carole L. Smith
(DATE RECEIVED) Oct 16, 1981

R301R 300M-10/79
152346

FORM R-307
(Rev. 9-72)

1/82

98

MARGIN RESERVED FOR BINDING

N. B.–WRITE PLAINLY WITH UNFADING BLACK INK–THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. AGE should be stated EXACTLY. See reverse side for affidavit.

The Commonwealth of Massachusetts

JOHN F. X. DAVOREN
SECRETARY OF THE COMMONWEALTH
DIVISION OF VITAL STATISTICS

DELAYED RETURN OF DEATH

1 PLACE OF DEATH: Midshire (County); Smalltown (City or Town); No. Community Hospital St. (If death occurred in a hospital or institution, give its NAME instead of street and number)

Smalltown (City or town making return)

Registered No. 15

2 FULL NAME: Mary T. Jones (If deceased is a married, widowed or divorced woman, give also maiden name.)

(Was deceased a U. S. War Veteran, if so specify WAR)

(a) Permanent Residence. No. 81 Front Street St. Largetown, MA (City or town and State)

MEDICAL CERTIFICATE OF DEATH

3 DATE OF DEATH: March 1, 1975 (Month) (Day) (Year)

4 DEATH WAS CAUSED BY: IMMEDIATE CAUSE

		INTERVAL BETWEEN ONSET AND DEATH
(a)	Cardiac Arrest	10 min
Due To (b)	Arteriosclerotic Heart Disease	5 yrs
Due To (c)		
OTHER SIGNIFICANT CONDITIONS		

Was autopsy performed? No

What test confirmed diagnosis?

5 Was disease or injury in any way related to occupation of deceased? No

If so, specify

(Attending Physician) David W. White, M.D.

(Address) 1 Center St. Smalltown, MA Date March 1 1975

6 Old Town Cemetery Largetown, MA
Place of Burial or Cremation (City or Town)
DATE March 3 1975

7 NAME OF FUNERAL DIRECTOR I. Dunnimin
ADDRESS 2 South St., Smalltown, MA

8 DEPONENT Sarah L. Johnson
(Address) 983 Seneca Blvd., Sometown, MA

PERSONAL AND STATISTICAL PARTICULARS

9 SEX: Female

10 COLOR: White

11 SINGLE (write the word) MARRIED WIDOWED DIVORCED UNKNOWN: Single

12 If married, widowed, or divorced
HUSBAND of (Give maiden name of wife in full)
(or) WIFE of (Husband's name in full)

13 AGE 80 Years 1 Months 4 Days | If under 24 hours Hours Minutes

14 Usual Occupation: Teacher (Kind of work done during most of working life)

15 Industry or Business: Public Schools

16 Social Security No. 001-32-6559

17 BIRTHPLACE (City) (State or country): Topeka, Kansas

PARENTS

18 NAME OF FATHER: Harry B. Jones

19 BIRTHPLACE OF FATHER (City) (State or country): Chicago, Illinois

20 MAIDEN NAME OF MOTHER: Alice P. Smith

21 BIRTHPLACE OF MOTHER (City) (State or country): Topeka, Kansas

22 Received and filed May 10, 1982

Carole L Smith
(Registrar)

2M-9-72-070286

REVERSE SIDE

AFFIDAVIT

WRITE LEGIBLY WITH DURABLE BLACK INK

The Commonwealth of Massachusetts
County of Midshire } ss.:

The undersigned, being duly sworn, depose and say that the record relating to the death of Mary T. Jones (Give name of decedent exactly as recorded on the original evidence) in the town (City or town) of Smalltown (Name of city or town), has not been previously recorded, and that the true statement of facts has been supplied by her (Him or her) on the form of certificate on the other side of this blank.

SIGNATURE	RESIDENCE (City or town, street and number, if any)	Spouse or heirs-at-law
Sarah L Johnson	983 Seneca Blvd. Sometown, MA	Sister

FURTHER, the written evidence submitted to substantiate the affidavit was:
Certified copy of Community Hospital record; Certified copy of birth record of deceased; Certified copy of cemetery record.

Proof of Residence (Chap. 46 Sec. 1C.) 1975 Street Listing

Date, May 10, 1982

Then personally appeared before me the person whose signature appear above and made oath that the statements subscribed to by her are true.

Name Carole L Smith

Official designation Town Clerk
(City or town clerk or assistant clerk)

1/82

R-308

PLEASE TYPEWRITE — EXCEPT SIGNATURE — ALL COPIES MUST BE LEGIBLE
USE ONLY STATE APPROVED RIBBONS AND MASS. STANDARD INK
AS REQUIRED BY GEN. LAWS. CHAP. 66 SECT. 4

3M - 5/81

The Commonwealth of Massachusetts

DEPRTMENT OF PUBLIC HEALTH

REGISTRY OF
VITAL RECORDS AND STATISTICS

RECORD OF DEATH
OUTSIDE OF COMMONWEALTH

STATE USE ONLY

Smalltown
(City or Town making this return)

Registered No 5

Deposition No 82-4

1 PLACE OF DEATH: Nebraska (State or Country); Lincoln (City or Town)

No City Hospital St
NAME OF HOSPITAL IF NOT IN HOSPITAL, NUMBER & STREET

2 FULL NAME Carolyn Anne Jones Smith
(If deceased is a married, widowed or divorced women, give also maiden name)

(a) Permanent Residence No 15 Center Street St Smalltown, MA
(City or Town and State)

MEDICAL CERTIFICATE OF DEATH

3 DATE OF DEATH February 4, 1982
(Month) (Day) (Year)

4 DEATH WAS CAUSED BY IMMEDIATE CAUSE
(a) Cerebral Hemorrhage — DURATION 3 days

Due To
(b)

Due To
(c)

OTHER SIGNIFICANT CONDITIONS

5. If Accident, suicide, or homicide (specify)

Was autopsy performed?

What test confirmed diagnosis?

6 Was disease or injury in any way related to occupation of deceased?

If so, specify

7 PHYSICIAN: Alfred R. Black (Name); 82 Main Street (No) (Street); Mincoln, Nebraska (City or Town) (State or Country)

8 New Town Cemetery Smalltown, MA
Place of Burial or Cremation (City or Town)
DATE February 8 19 82

9 NAME OF FUNERAL DIRECTOR John J. Burry
ADDRESS 4 W. Main St., Lincoln, Nebraska

10 Deponent William T. Smith
(Address) 15 Center St., Smalltown, MA

PERSONAL AND STATISTICAL PARTICULARS

11 SEX	12. COLOR	13 NEVER MARRIED / MARRIED / WIDOWED / DIVORCED / UNKNOWN
Female	White	Married

14. If married, widowed, or divorced
HUSBAND of (Give maiden name of wife in full)
(or) WIFE of William T. Smith (Husband's name in full)

15 AGE 42 Years 3 Months 2 Days — If under 24 hours: Hours Minutes

16 Usual Occupation Housewife
(Kind of work done during most of working life)

17 Industry or Business Homemaking

18 Social Security No 010-44-3344

19 BIRTHPLACE (State or country) Boston, MA

PARENTS

20 NAME OF FATHER Clarence B. Jones

21 BIRTHPLACE OF FATHER Nebraska
(State or country)

22. MAIDEN NAME OF MOTHER Minnie T. White

23. BIRTHPLACE OF MOTHER Oklahoma
(State or country)

24
I hereby certify that satisfactory documentary evidence was filed

Feb. 26, 1982 Carole L. Smith
(Date) (City or Town Clerk or Registrar)

REVERSE SIDE

AFFIDAVIT

WRITE LEGIBLY WITH DURABLE BLACK INK

THE COMMONWEALTH OF MASSACHUSETTS
COUNTY OF Midshire } ss.:

The undersigned, being duly sworn, deposes and says that the record relating to the death of Carolyn Ann Jones Smith (Give name of decedent exactly as recorded on original evidence) in the Lincoln (City or Town) of Nebraska (State or Country) has not been previously recorded, and that the true statement of facts has been supplied on the form of certificate on the other side of this blank.

SIGNATURE	RESIDENCE (City or town, street and number, if any)	SPOUSE OR HEIRS-AT-LAW
William J. Smith	15 Center Street Smalltown, MA	Spouse

FURTHER. The written evidence submitted to substantiate the affidavit was.
Certified copy of death record from Lincoln, Nebraska

* Proof of residence 1982 Street Listing
Then personally appeared before me the person whose signature appears above and made oath that the statement subscribed to are true.

Date Feb. 26, 1982

Name Carole L. Smith

Official Designation Town Clerk
(City or town clerk or assistant clerk or registrar)

NOTICE

Expense of affidavit should be borne by the individual making this return.
*Any of the following constitute sufficient evidence of residence at time of death
1 - Street listing for year of death.
2 - Voters registration record for year of death.
3 - If serviceman who entered service as a minor, parent's residence at time of entering service.

CITY AND TOWN CLERKS SHOULD TRANSMIT A COPY OF THIS RETURN TO THE COMMISSIONER OF PUBLIC HEALTH AT ONCE

/82

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF
VITAL RECORDS AND STATISTICS

The registration numbers assigned by me to the pink certificates for the month of February **, those of residents of this town who have died in some other city or town within the commonwealth, which have not been returned to you, are as follows:**

Nos.

4, 6, 7

Date March 10 **19** 82 **(Signed)** Carole L. Smith

Clerk of Smalltown
(Name of City or Town)

NOTE: USE FORM R-302 FOR MAKING A RETURN OF A RECORD OF DEATH OF A RESIDENT OF YOUR MUNICIPALITY WHO DIED OUTSIDE OF THE COMMONWEALTH FOR WHICH YOU HAVE RECEIVED A DEATH RECORD DIRECTLY FROM THE CITY OR TOWN CLERK OR STATE OFFICE. (CHAP. 46. SECT. 12)
USE FORM R-308 WHEN MAKING A RETURN OF A RECORD OF AN OUT OF STATE DEATH ESTABLISHED UNDER CHAP. 46. SECT. 1-C

R-326. 10M - 1/78 phr

The Commonwealth of Massachusetts

UNITED STATES OF AMERICA

Certificate of Death

I, the undersigned, hereby certify that I am the Clerk of the TOWN of SMALLTOWN, County of MIDSHIRE, and Commonwealth of Massachusetts; that the records of Deaths required by Law to be kept are in my custody, and that the following is a true copy from the records of Deaths, as certified by me.

1. Date of Death	December 30, 1981
2. Place of Death	Smalltown, Massachusetts
3. Name	John Frederick Doe
3a. Maiden Name	
4. Sex	Male — Color or Race White
5. Single, Married Widowed or Divorced	Widowed
6. Age	73 Years — Date of Birth April 7, 1908
7. Residence at time of Death	52 North Street, Smalltown, Massachusetts
8. Occupation	Mechanic
9. Place of Birth	Massachusetts
10. Name of Husband or Wife	Mary Jane Somebody
11. Name of Father	Frederick J. Doe
12. Birthplace of Father	Massachusetts
13. Name of Mother (Maiden Name)	Sarah Person
14. Birthplace of Mother	Canada
15. Disease or Cause of Death	Hepatic failure, Metastatic Melanoma to liver, Primary melanoma of scalp, Asciter/Pleural effusion
16. Place of Interment	Peaceful Acres, Smalltown, Massachusetts
17. Date of Record	December 31, 1981

SEAL

And I do hereby certify that the foregoing is a true copy from said records.

Witness my hand and seal of said Town of Smalltown

on this 15th day of January 19 82

Carole L. Smith

Clerk

Year 1981

Vol VIII

Page 160

No 143

TOWN OF SMALLTOWN
MASSACHUSETTS

This is to certify that according to the records of death in this office

JOHN FREDERICK DOE

Died on December 30, 1981 Age 73 years

Date of birth April 7, 1908

Place of birth Massachusetts

Cause of death Hepatic failure, Metastatic Melanoma to liver, Primary melanoma to scalp, Asciter/Pleural effusion

Date of record December 31, 1981

SEAL

Carole L. Smith
Town Clerk

Date issued January 15, 1982

R309 100M-2-74 091463

1/82 STUB No. 82-1

BURIAL (OR REMOVAL) PERMIT

Stub to be retained by officer issuing permit

Issued to Name of Funeral Director - Item #19a on Form R-301R

Name of Deceased Item #1

Age Item #1 years Item #6b months Item 6b days

Place of death Item #4a

Date of death Item #3

Cause of death Item #20 (a), (b), (c)

Interment at Item #18c, 18d

Date permit issued Date you issued permit

Certified by Item #27 M. D.

R-309 SECTION 2

1/82

Division of Vital Statistics

The Commonwealth of Massachusetts

JOHN F. X. DAVOREN

SECRETARY OF THE COMMONWEALTH

No. 82-1

OFFICIAL BURIAL (OR REMOVAL) PERMIT

(Issued under the provisions of Chapter 114, Section 45, General Laws, Ter. Ed., as amended.)

[This permit can be signed only by the agent of the Board of Health (or in towns where there is no Board of Health by the town clerk) of the city or town in which the death occurred AFTER the FILING and acceptance of a satisfactory certificate of death, printed or typed in durable black ink.]

Your city or town (City or town) date (Date) 19

A satisfactory certificate of death having been filed, permission is hereby given to

Item #19a (Name) Item #19c (Address)

for the removal from your city or town, if a removal (To be filled out in case of removal) and the interment

at Item #18c Cemetery in Item #18d, of the

body of Item #1 (Give full name of deceased) who died Item #3 (Month) (Day) 19 (Year)

age Item #6a years, Item #6b months, Item #6b days.

Cause of death Item #20(a), (b), (c)

If a U. S. War Veteran, specify what war, organization, etc. Item #13

Residence at time of death Item #14

Your signature

(Signature of Agent of Board of Health, or, in towns where there is no Board of Health, of Town Clerk)

R 309 SECTION 3

No. 82-1

BURIAL (OR REMOVAL) PERMIT

This coupon to be returned immediately, properly endorsed

to Your office (Office issuing permit)

City or Town of your city or town Mass.

Name of deceased Item #1

If a U. S. War Veteran, specify what war, organization, etc.

Item #13

Leave endorsement blank - to be filled out

ENDORSEMENT

by and signed by cemetery superintendent

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at (Name of cemetery or crematory) (City or town)

on

Certified by (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, undertaker should sign and return this stub.

Form R 309A. 10M 112456

1/82

The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

No. .....

COPY OF OFFICIAL REMOVAL PERMIT

(Prepared in accordance with Chapter 114, Section 46, General Laws, as amended.)

BOARD OF HEALTH, ... 19.....
(city or town) (date)

A removal permit, properly endorsed, has been received for the removal from

..... and the interment
(city or town) (state)

at ..... cemetery in .....

of the body of .....
(full name of deceased)

who died ..... 19..... Age ..... years ..... months ..... days.
(month, day and year)

Cause of death (if known) .....

Residence at time of death .....

(Copy below all other information contained on original removal permit including number, date and place of issue, name of person signing it and name of cemetery superintendent or person endorsing same.)

....
(Copy prepared by) (Title)

PREPARE IN DUPLICATE

Retain buff copy for Board of Health record; send pink copy to Superintendent of cemetery where body is buried. RETURN original removal permit to city or town of origin

The Commonwealth of Massachusetts

AFFIDAVIT

FOR DISPOSITION OF DECEASED VETERANS

Chapter 604, Acts of 1949

FORM 31 HOBBS & WARREN, INC. PUBLISHERS (REV. 1957)

THE COMMONWEALTH OF MASSACHUSETTS, COUNTY OF Midshire SS.

THE UNDERSIGNED SAYS TO THE BEST OF HIS KNOWLEDGE AND BELIEF THAT

John Frederick Doe
Name of Veteran

52 North St., Smalltown, MA 02056
Last Known Address

Boston, Massachusetts
Place of Birth

April 7, 1908
Date of Birth

Smalltown, Massachusetts
Date and Place of Death

Hepatic failure
Cause of Death

John F. Doe, Jr., Son
Name and Address of Nearest of Kin and Relationship

11 Main St. Someplace, Ma

November 30, 1942
Date of Enlistment

February 23, 1946
Date of Discharge

Sargeant
Rank or Rating

U.S. Army
Organization

10 000 222
Service Number

Jan. 4, 1982, Peaceful Acres, Smalltown
Date and Place of Burial or Cremation

SEC. A LOT 5 GR. NO. 1 PATH

Location of Grave

SIGNED UNDER THE PENALTIES OF PERJURY

SIGNED BY I. Dunnimin
1. Dunnimin

ADDRESS 2. South St., Smalltown, MA

MARRIAGES

4
MARRIAGES

NOTES

I. NOTICE OF INTENTION OF MARRIAGE (Form R-105)

A. GENERAL *

The first step to be taken by parties intending to be married in Massachusetts is the filing of a Notice of Intention of Marriage. [207:19] The notice must be in writing, on blanks furnished by the state registrar of vital records and statistics, must contain all the information required by law, and include a statement that there are no legal impediments to the marriage. [207:20] The list of impediments to marriage contained in section 1 through 6 of Chapter 207, furnished by the state registrar, must be posted in a conspicuous place in the clerk's office. [207:37] (see sample form, page 141)

The applicants must swear to the truth of the information they have entered on the notice and further must swear that there are no legal impediments to their marriage. The required oath may be administered by a city or town clerk or assistant clerk. It may also be administered by a regularly employed clerk who has been designated, in writing, by the city or town clerk. The written designation must be made a matter of record in the office. The record may be made by entering the name of the clerk in the book used to record elected and appointed officials of the town. [207:19,20]

SAMPLE OATH

Do you solemnly swear that all of the statements entered on this Notice of Intention of Marriage are true to the best of your knowledge and belief and that there are no legal impediments to your marriage?

A clerk is not required to receive Notices of Intention of Marriage on Sundays or legal holidays or in any place except his office. However, he may do so if he wishes. [207:23]

---

* Throughout this manual many references will be made to the General Laws of the Commonwealth which apply to specific items and where further information may be found. In order to conserve space, the following legend will be used. The first number denotes the chapter of the General Laws and numbers after the colon, the section of that particular chapter. For example, [46:1] means chapter 46, section 1 of the General Laws.

Notices of Intention of Marriage are *permanent* records and must be properly protected and preserved (state retention schedule 2.128). See also Chapter 66 of the General Laws covered elsewhere in the *Town Clerk's Manual*.

B. INFORMATION REQUIRED

It is important that you avoid being in a position in which an applicant for a marriage certificate can later claim that an error was made in the intention by personnel in your office. Therefore, it is recommended that you have the applicants complete the intention form themselves. Information should be legible. Check the information with the applicant prior to accepting the intention to be sure that you can read what he or she has entered.

You may refuse to issue a certificate of marriage if you have reasonable cause to believe that any of the statements contained in the Notice of Intention of Marriage are incorrect. But you may, in your own discretion, accept depositions under oath, made before you, which shall be sufficient proof of the facts stated in the notice of intention. [207:35]

If you are satisfied that pertinent information cannot be obtained, you may dispense with the statement of facts required on a notice of intention *provided* they do not relate to or affect the identification or age of the parties, or relate to a former marriage of either party. [207:35] Such information which might be omitted could be the names and birthplaces of the parents. (see Appendix C for information required on Notice of Intention of Marriage)

C. FILING A NOTICE OF INTENTION

1. Marriages within Massachusetts [207:19,20]

All persons intending to be married in Massachusetts, regardless of their residence, must appear *in person* and *together* in a city or town clerk's office to fill out and sign the notice of intention. [207:19]

The notice of intention may be filed in any city or town clerk's office and the parties may be subsequently married in that city or town or in any other in Massachusetts.

NOTE: *Prior to February 10, 1980, the date on which Chapter 718 of 1979 became effective, the place of filing notice of intentions depended upon the residence of the parties to the marriage. Therefore, you may find notices of intention in your files which have been signed by only one party to the marriage, the one who*

was a resident of your town. Notices of intention had to be signed by both parties in the same town only if both were residents of that town or if both were out-of-state residents.

a. exeptions

- illness

  If a registered physician makes an affidavit in writing that a party to the marriage is unable, by reason of illness, to appear, the intention may be filed on behalf of such person by his or her legal guardian. If there is no parent or legal guardian competent to act, the intention may be filed by either the physician certifying to the illness or by the other party of the intended marriage. [207:20] The physician's affidavit must be kept with the notice of intention.

- military duty

  If one or both of the parties are in the armed forces, the intention may be filed by either party, *provided* that one is a Massachusetts resident. [207:20]

2. Out-of-State Marriages

If an individual is planning to be married in another state, *no* intention can be filed in any Massachusetts city or town. Advise the individuals to contact the state registrar of vital records in the state in which the marriage is to take place.

However, if a person residing in and intending to continue to reside in Massachusetts is prohibited from contracting a marriage under Massachusetts laws and goes to another state to contract a marriage there for the purpose of evading Massachusetts laws, such a marriage is void in Massachusetts. [207:10]

3. Waiting Period [207:19]

Notice of Intention of Marriage must be filed with the clerk at least three days prior to an intended marriage. Notice of intention must not, under any circumstances, be back-dated.

In calculating the three day waiting period, Sundays and legal holidays must be counted. Consider the day on which the notice of intention is filed as day zero. The

certificate of marriage may be issued *on* or *after* the third day. For example: if the marriage is to take place on a Monday, the notice of intention must be filed no later than the previous Friday. If the marriage is to take place on a Saturday, the notice of intention must be filed no later than the previous Wednesday.

If your office is not regularly open on Saturday, you should make some special arrangement so that the parties to the marriage may obtain the certificate on Saturday. One possible arrangement is to leave the certificate at the fire or police station on Friday with instructions that it not be given out until the next day.

The certificate may not be given out earlier than the third day following the filing of notice of intention unless a waiver of the waiting period is presented.

4. Waiver of Waiting Period [207:30]

a. by court

Upon application by the bride and groom, the three day waiting period may be waived by a judge of probate or justice of the district court. If the bride and groom are both Massachusetts residents, or both are out-of-state residents, both must apply for the waiver. If one is a Massachusetts resident and the other is an out-of-state resident, the Massachusetts resident must apply. Advise them to call the clerk of the probate or district court which has jurisdiction over the community in which the intention is to be filed. The clerk of court will advise them of the specific requirements of the court with respect to waivers.

You may wish to check with the clerk of court yourself so that you may inform the parties of the requirements. The court may require that a specific appointment be made, that proof of age be presented, or that both parties be present. There is a fee for the waiver.

b. emergencies

In extraordinary cases or in emergencies, when the death of either party to the marriage is imminent, a marriage certificate may be issued without delay upon the authoritative request of a minister, clergyman, priest, rabbi, representative of a Spiritual Assembly of Baha'is, or the attending physician. [207:30]

Obtain the request in writing and file it with the notice of intention.

c. immigrants

If either of the parties has arrived as an immigrant from a foreign country within five days, the notice of intention may be filed at any time before the marriage and a certificate shall be issued at any time after the filing of the intention. [207:29] In this case, ask to see the immigrant's visa as proof he or she has entered the country within five days.

D. FEE

The fee for filing a Notice of Intention of Marriage is $4.00 [207:19; 262:34 (42)], unless your town meeting has established a different fee.

II. MEDICAL CERTIFICATES [207:28A]

A. GENERAL

A marriage certificate (Form R-101) cannot be issued by the clerk until he has received from each party to the intended marriage, a medical certificate signed by a physician registered and practicing in Massachusetts, registered or licensed to practice in another state or territory of the United States, the District of Columbia, or in Canada, or a commissioned medical officer in active service in the armed forces, or in the public health service.

- Exceptions: In emergency cases where the death of either party to the intended marriage is imminent, or where the female is near the termination of her pregnancy and upon the authoritative request of a minister, clergyman, priest, rabbi, or attending physician, the clerk may issue a marriage certificate without having received a medical certificate. This request must be made in writing and filed with the notice of intention.

Medical certificates may be presented either at the time of filing the notice of intention or at the time the marriage certificate is issued. The examination by the physician and the laboratory test shall have been made not more than 30 days prior to the date of filing intentions, or, if made after the date of filing intentions, not more than 60 days prior to issuing the marriage certificate. (see sample form, page 145)

A laboratory report without a physician's signature cannot be accepted in place of a medical certificate. The applicant should sign the medical certificate. This is not required by

section 28A, but the Department of Public Health has provided space and instructions on the forms so that clerks may be sure the certificate is that of the person who is presenting it.

Blank Massachusetts certificates (Form PH-V-6) and lists of all approved Massachusetts laboratories are available from the Department of Public Health, Division of Venereal Disease, 600 Washington Street, Boston 02111. Clerks may supply blank forms to physicians or to applicants for use by their physicians.

Medical certificates should be kept for one year from the date of receipt. (state retention schedule, 2.129)

B. INFORMATION REQUIRED

A physician shall have examined the applicant and the examination shall include a serological test for syphilis made by a laboratory of the Department of Public Health or a laboratory approved by the department. In addition, the physician must certify for a female applicant that she has:

- been tested and found immune to rubella, OR
- if tested, and not found immune to rubella infection, been advised of the risks of contracting rubella during childbearing years and of the availability of an immunizing vaccine, OR
- if not tested, been offered a test to determine immunity to rubella and advised of the risks of contracting rubella during childbearing years, OR
- is past the childbearing age or is incapable of conception (this provision does not appear on the face of the medical certificate form, but is contained in the last sentence of section 28A as it appears on the back of the form).

C. OUT-OF-STATE CERTIFICATE

Out-of-state medical certificates, on official forms, may be accepted if they have been signed by a qualified physician. You should check the form related to a female applicant to be sure it includes the required information for rubella. If so, it may be accepted as presented. If not, advise the applicant to see either a Massachusetts physician or her own out-of-state physician for her certification in regard to the rubella test.

The out-of-state laboratory must be a U.S. public health lab, or one approved by the Department of Health of the state. It may be presumed that if the certificate is properly signed by a physician, the laboratory was an approved one.

D. CERTIFICATES FROM OUTSIDE U.S.

For applicants who must have the blood test done outside of the United States (other than military personnel), it is suggested that you give the applicant a Massachusetts medical certificate form. He should then have the test done in the foreign country at a U.S. public health lab. The lab would then send the results to the medical attaché at the embassy in that country who would attach a certified statement that the requirements were met. The medical attaché and the applicant should both sign the medical certificate.

III. CERTIFICATE OF MARRIAGE (Form R-101)

A. GENERAL

In Massachusetts, the marriage license is the Certificate of Marriage (Form R-101). (see sample form, page 146) It is to be made out by the clerk of the city or town in which the notice of intention is filed. The parties to the marriage must present the Certificate of Marriage to the minister or magistrate who is to solemnize the marriage before the marriage can take place.

NOTE: *In this manual, the term "minister" will be used when referring to those authorized to solemnize marriages. (see Appendix C, page 174 for a complete list of officials so authorized)*

Certificates may be mailed to the applicants *provided* all the necessary documents have been received and the fee has been paid.

B. PREPARING A CERTIFICATE OF MARRIAGE

In making out the Certificate of Marriage, you should either type or print clearly using black Massachusetts standard ink as these certificates will become permanent records. (state retention schedule 2.124)

- item 1 Leave place of marriage blank. This is to be filled out by you after the certificate is returned by the minister.

- item 2 Leave date of marriage blank. This is also to be filled out by you after the certificate is returned by the minister. The intention number is the number you have assigned to the intention which corresponds to the certificate. Enter the name of your city or town in the space above city or town making return.

- items 3 through 20 Copy into the appropriate spaces, the information entered on the intention. If either party is under age, type "court order on file" under the age in item 4 and/or item 13 on the certificate or in the margin.

- item 21 Enter the date on which the intention was filed. When the certificate is issued, enter that date in the appropriate space.

  The only instance in which the date the certificate is issued may be less than three days after the date on which the intention was filed is when you have received a court waiver of the waiting period or a written request from a minister. (see page 110) In this case enter the words "court waiver" or "minister's request" in the margin. When the certificate is dated for issuance, enter the date in the space provided at the bottom of the intention.

  The certificate must be signed under item 21 by the clerk or the assistant clerk before it is given to the applicant. An employee designated to receive intentions under Chapter 207, section 20 is *not* authorized to sign the certificate. You may use a signature stamp on the certificate if you wish.

- item 22 Leave blank. This is to be filled in and signed by the minister who solemnizes the marriage prior to returning it to the clerk of the city or town in which it was issued.

- item 23 Leave blank. This is to be dated and signed by the clerk or assistant clerk after the marriage when the certificate has been returned by the minister.

- left hand margin Calculate 60 days after the date of filing intentions and insert that date in the space provided after, NOT VALID AFTER. This should be the actual date on which the certificate expires, not the words sixty days. (see Appendix C, page 178 for chart showing expiration dates) Add the words "medical certificates received." If applicable, add any other notes or explanations as needed, such as: waiver of waiting period on file, court order on file, minister's request for waiver of waiting period on file, minister's/physician's request for waiver of medical certificates on file.

Check all information on the certificate with the intention before issuing it to be sure that it has been accurately copied, and that all necessary notes have been added. It is also helpful

if you ask the applicant to check the information on the certificate before he or she leaves the office. In this way errors are likely to be found before the certificate is issued.

C. DOCUMENTS REQUIRED

Before issuing the Certificate of Marraige, be sure you have the following:

- completed and sworn Notice of Intention of Marriage, filed at least three days prior to issuing the certificate. [207:28] (see pages 109 and 110 for waiver of waiting period and exceptions)

- medical certificates for each applicant, properly signed by the physician and the applicant and not over thirty days old if presented at the time intentions were filed; not over sixty days old if presented after the intentions were filed. [207:28A] (see page 111 for exceptions)

- the fee of $4.00 [262:34(42)] or the amount established by your town meeting

D. RETURN OF CERTIFICATE FROM MINISTER

All those who solemnize marriages must make and keep a record of each such marriage. The record must contain all the information required to be recorded under Chapter 46, section 1. [207:40]

Between the first and tenth days of the month following each marriage the minister must return each Certificate of Marriage to the clerk who issued it.

Item 22 must be completed by the minister and *signed* by him before it can be accepted for recording. If the certificate has been signed by two ministers, it can be accepted as complete and in order.

If the minister was an out-of-state resident, he should also return, with the completed Certificate of Marriage, a copy of his authorization to solemnize, issued by the state secretary. The authorization should be filed with the intention to which it relates.

Chapter 718 of the Acts of 1979 became effective on February 10, 1980. Prior to that date, ministers were required to return a copy of the Certificate of Marriage to the clerk of the town in which the marriage occurred even though neither party was a resident of that town. Therefore, you will find in your files some copies of these Certificates of Marriage (Form R-103).

E. COMPLETING THE CERTIFICATE OF MARRIAGE FOR RECORDING

1. Massachusetts Certificates [46:1]

If the marriage took place in Massachusetts, all certificates returned in legal form by the person who solemnized the marriage shall be recorded by the clerk receiving them.

Check to be sure that each certificate received is one you have issued. If the certificate is not one you issued but it has been properly completed and signed by the minister, simply forward it to the clerk who did issue it. Occasionally a minister forwards a certificate to the wrong town.

Check to be sure that item 22 on the certificate has been properly completed and that the minister has signed it in the appropriate place.

If the certificate is in order, enter the date of receipt and sign it in item 23 using your full name, not just your initials. Assign the certificate a number and enter it at the top right in the space for registered number. Assign 1 to the first certificate received relating to a marriage which took place in January of a given year. Number each certificate in consecutive order as it is received for each marriage which took place from January 1 through December 31 of that year. Even though you may not receive some of the certificates until well into the next year, number and file them in order in the year in which the marriage took place.

A certificate returned to you which has not been properly completed or which has been inaccurately filled out by the minister must be completed and/or corrected. If possible, have the minister come to your office to complete or correct the certificate or if this is not possible, return the certificate to him with a note indicating what needs to be done. If, after diligent efforts, you are unable to obtain a correct certificate, you must record the certificate as received, *provided* it has been signed by the minister. The minister's signature is required as proof that the marriage actually took place.

If you should receive a Massachusetts certificate and find that the marriage took place outside of Massachusetts, you should *not* record it. Return this certificate to the person who solemnized the marriage informing him that he cannot solemnize a marriage in another state using a Massachusetts certificate. Also, advise the parties to the marriage to contact the registrar of vital records and statistics of the state in which the marriage took place to determine the proper procedures for that state.

2. Out-of-State Certificates Received from a Party to the Marriage [207:36]

Any resident of the commonwealth, who marries outside of the commonwealth and thereafter resides in the United States or its territories or possessions, may establish a record of the marriage by *personally* presenting documentary evidence of the marriage to the clerk of the city or town in which he lived at the time of the marriage. The spouse or heirs of the Massachusetts resident may also establish the record of marriage in this manner.

Form R-107 should be used for this purpose and the sworn affidavit must be obtained as indicated on the back of the form. Documentary evidence submitted to substantiate the affidavit should be a certified copy of the original marriage record as filed in the place of marriage. If this is not available, contact the state supervisor of vital records and statistics for advice on what evidence might be substituted. The documentary evidence, or a copy made by the clerk and attested as a true copy, must be filed with the R-107. (see sample form, page 152)

Proof of residence at the time of the marriage is also required on the back of the form and a list of given documents which may be used as sufficient evidence for such proof. *At least one* of the parties to the marriage must have been a resident of your town at the time of the marriage in order for the record to be established in your town. If neither party was a resident, a record *cannot* be established.

If the documentary evidence is not, in your opinion, sufficient to establish the marriage record, you may refuse to file such evidence. If the person requesting the marriage recorded wishes to pursue the matter, give him your refusal in writing and advise him that he may petition the judge of the probate court for the county in which the town lies. After a hearing at which you will have an opportunity to be heard, the judge may order you to receive and file such evidence as sufficient to establish a record.

FEE: The fee for entering a Certificate of Marriage filed by persons married outside the commonwealth is $2.00 [262:34(43)], unless your town meeting has established a different fee.

3. Out-of-State Certificates Received Directly from an Official

If you receive, directly from the clerk of a city or town outside of the commonwealth, or from an official of another state, a certified copy of a marriage record relating

to a person who was a resident of your town at the time of marriage, the marriage *cannot* be recorded *unless* the procedures outlined in paragraph 2 above are followed.

While it is not required by the General Laws, you may notify the party to a marriage that you have received the marriage certificate. If he wishes to have the marriage recorded, he must execute the required deposition on Form R-107. The out-of-state marriage certificate may be used as the required documentary evidence and missing information may be supplied by the party to the marriage.

NOTE: *Prior to March 23, 1982, the effective date of Chapter 684 of the Acts of 1981, it was possible to record, under 46:12, an out-of-state marriage without a deposition when a certified copy of the marriage record was received directly from an out-of-state official. However, Chapter 684 eliminated these provisions from 46:12. You may find out-of-state marriages among your older records. These records may have been made using the out-of-state certificate only, or using the out-of-state certificate and Form R-102 without a deposition.*

IV. DELAYED RECORD OF MARRIAGE (Form R-106) [46:13]

A. GENERAL

Form R-106, Delayed Record of Marriage, should be used only to establish a record of a marriage *not* previously recorded. Ordinarily, the use of this form is made necessary only if the date of the marriage is more than one year prior to the request for recording, or if the person who solemnized the marriage died prior to making the proper returns or if it is otherwise impossible to contact him. (see sample form, page 151)

1. Marriages Within One Year - Minister Can be Contacted

If the marriage took place within one year of the request for recording and the minister can be contacted, he should be requested to make the proper return and the delayed form *should not* be used.

Check your records to see if you have on file a notice of intention which relates to the marriage. If so, it will be helpful to the minister and to the person wishing to have the marriage recorded for you to complete a duplicate Form R-101 from the intention. The minister can then complete and sign it under item 22 and return it to you for recording.

If you do not have on file an intention which relates to the marriage, contact the state registrar of vital records and statistics to determine whether or not the marriage may have been recorded in another Massachusetts town.

2. Marriages More than One Year Ago, or if Within One Year and Minister Cannot be Contacted

If the marriage took place more than one year prior to the request for recording, or if the marriage took place within the past year but the minister cannot be contacted, the delayed record form should be used. This requires an affidavit, sworn to and signed by either party to the marriage or a relative of either party. It also requires documentary evidence to substantiate the affidavit. You should be certain that the evidence is sufficient to show that the marriage actually took place. (see back of Form R-106)

a. marriages on or after February 10, 1980

- intention filed prior to February 10, 1980

  Notice of intention was required to be filed in the town of residence of *each* party to the marriage and may have been filed in two different towns. Therefore, the delayed record of marriage may be established in the town or towns in which the notice of intention was filed.

  However, the delayed record of marriage may not be established in the town in which the marriage took place if different from the residence of the parties since the requirement for filing Form R-103, Copy of Certificate of Marriage, was eliminated as of February 10, 1980. (see page 148 for sample Form R-103)

- intention filed on or after February 10, 1980

  Notice of intention was required to be filed by both parties to the marriage in the *same* town, regardless of their residence as of February 10, 1980. Therefore, the delayed record of marriage may be established only in the town in which the intention was filed.

b. marriages prior to February 10, 1980

If the marriage took place prior to February 10, 1980, a delayed record may be established in the town of residence of either or both parties to the marriage where an intention was required to be filed. If both parties to the marriage were out-of-state residents, the delayed record may be established in the town in which intentions

were filed. In these cases, you should be certain that you have the intention on file before proceeding with the delayed record form.

A delayed record may also be established in the town in which the marriage took place if it was different from the town or towns in which the intentions were filed.

Unless a certified copy of the marriage certificate is available from another town, suggest to the party wishing to establish the record that he contact the clerk of the town in which he lived at the time of the marriage (or the town in which he filed intentions if both parties to the marriage were out-of-state residents) and start the process there.

B. DOCUMENTARY EVIDENCE

When establishing a delayed record of marriage, the resultant record will be only as good as the evidence upon which it was based. Acceptable documentary evidence may be one of the following:

- a certified copy of a written statement made at the time of the marriage by any person since deceased who was required by law to furnish evidence of the marriage, that is,the person who solemnized the marriage
- a sworn affidavit of a witness to the marriage
- a certified copy of the minister's record or church records if the marriage took place in a church, or records of other accepted religious organizations
- if the marriage was recorded in another city or town, a certified copy of that record. (this would apply only to marriages for which the intention was filed prior to February 10, 1980, and in these cases it would be the best documentary evidence. It would also supply all of the necessary information for completing the front of Form R-106.)

C. COMPLETING THE DELAYED RECORD OF MARRIAGE FOR RECORDING

If you have the intention related to the marriage on file, copy the information from the intention onto the front of a Form R-106 under items 3 through 22. Documentary evidence must be submitted to substantiate the required affidavit and to supply the information to be entered under items 1, 2, and 23.

Enter under item 24 on Form R-106 the date the intention was filed. If there is no intention on file because you should have received an old form R-103 as the clerk of the town in which the marriage took place, enter a dash under item 24. Complete and sign item 25 on the front of Form R-106. (see sample old Form R-103, page 148)

Assign a registered number in the regular order along with the certificates of marriage, Form R-101 and Form R-103, for the year in which the marriage took place. Enter that number in the space provided at the top right of the form after registered number.

Be sure that you have completed the back of Form R-106 and that the person wishing to establish the record has signed it in the appropriate place and that you have administered the oath.

SAMPLE OATH

> *Do you solemnly swear that the statement you have signed is true to the best of your knowledge?*

You should then date and sign the back of the form and enter your title. You may accept a notarized affidavit if the deponent cannot appear in person in your office *provided* it is accompanied by sufficient documentary evidence.

If you were required to make a return to the state registrar of vital records and statistics (see page 131), transmit a copy of the Delayed Record of Marriage noting on the back of the form the submitted documentary evidence.

D. FEE

The fee for filing a Delayed Record of Marriage is not specified in 262:34. Since the fee for a delayed return of birth is $2.00 [262:34(14)], that amount might be charged unless your town meeting has established a different fee. Check with your town counsel to determine an appropriate fee.

V. AFFIDAVIT AND CORRECTION OF A MARRIAGE RECORD (Form R-104) [46:13]

A. GENERAL

Form R-104, Affidavit and Correction of a Record of Marriage, should be used to correct information contained in, or to add information missing from, a marriage certificate which has already been recorded. Amendments or additions, to a marriage record can be made *only* to reflect the correct information at the time of the marriage. However, before proceeding with an affidavit and correction, check your records to see whether or not a simple clerical error has been made in transferring information from the intention to the marriage certificate or in copying the information from the marriage certificate into the record book. (see sample form, page 149)

If an error was made on the original marriage certificate, contact the state registrar's office to determine if the error was subsequently transmitted to him. If so, an affidavit and correction may be necessary. If the record in the state registrar's office is correct, you may simply correct the original marriage certificate. Initial the correction and note clerical error. You will need to make the same notation in your record book, if one is used.

If the error was made in transferring information from the original marriage certificate to the record book, correct the record book, initial the correction and note clerical error.

If the error is not a simple clerical one, or if there is missing information which should be added to the record, Form R-104 must be used. The required affidavit, appearing on the back of the form, may be given by either party to the marriage, a relative having knowledge of the facts, or the person who solemnized the marriage. Documentary evidence to substantiate the affidavit is also required.

Any correction or addition to the marriage record must accurately reflect the facts of the case *at the time of the marriage*. For example, the record cannot be changed to reflect a change of name if that change occurred after the marriage took place.

If the original marriage was recorded incorrectly or incompletely in more than one town, an Affidavit and Correction of Record of Marriage must be made in each town. The clerk of one town *cannot* transmit a Form R-104 to another town for the purpose of having that record corrected.

B. DOCUMENTARY EVIDENCE

The purpose of documentary evidence is to prove that the original record is, in fact, in error and that the information given by the person requesting the change or addition is, in fact, the correct information. It may be a written record made at the time of the marriage by a person since deceased who was required to furnish information, such as a party to the marriage or the person who solemnized the marriage. If the marriage was recorded correctly in one town, a certified copy of that record may be used as the documentary evidence for correcting the record in another town.

Other acceptable documentary evidence will depend specifically upon what information is to be corrected or added. It is listed below under each item in order of preference, the most acceptable evidence appearing first on the list.

1. Place or Date of Marriage

   - certified copy of minister's records
   - certified copy of church records, if the marriage took place in church or certified copy of a religious organization's records

2. Name of a Party to the Marriage

   - certified copy of birth record
   - baptismal certificate
   - family Bible entry
   - school entrance or early school record
   - first federal census record after the year of birth
   - passport or naturalization record, if prior to marriage
   - other written evidence made at or near the time of birth, such as life insurance policy, bank book, etc.

3. Name of Parents

   - certified copy of parent's marriage record
   - certified copy of birth record of the party to the marriage showing parent's name

- certified copy of parent's birth record
- port of entry, immigration, naturalization record of parents if made prior to the date of birth of the child

4. Age at the Time of Marriage
   - certified copy of birth record
   - see list of documentary evidence relating to proof of age on Notice of Intention of Marriage, page 171

5. Residence at Time of Marriage (a request for a correction of this item would be very unusual)
   - street listing
   - voter registration record
   - certificate of clerk of town of residence

6. Number of the Marriage
   - certified copy of divorce decree(s)
   - certified copy of annulment decree

7. Birthplace
   - certified copy of birth record

8. Information in item 22 (place and date of marriage and name and address of minister)
   - sworn affidavit of minister
   - certified copy of church or religious organization record

C. COMPLETING THE AFFIDAVIT AND CORRECTION FOR RECORDING

Enter all the required information on the front of the form, making the appropriate corrections or additions. If the intentions were filed in your town, add the intention number. Enter the registered number of the original marriage record. Enter the date the original marriage certificate was filed under item 24, complete and sign item 25.

Assign to the Form R-104, a deposition number *not* in the registered number series of the original marriage certificates. A convenient numbering system is one which includes the year and a number, such as "80-1," "80-2," etc.

Fill out the back of the form. Be sure that the person requesting the correction signs the back of the form in the appropriate place and that you administer the required oath and sign the back of the form as well. (see page 121 for sample oath)

If the person wishing to have the correction or addition made cannot appear in person in your office, you may accept a notarized affidavit and make the appropriate changes, *provided* the affidavit is accompanied by sufficient documentary evidence.

Reference to the affidavit and correction must be made in the margin of the original record, both on the certificate and in the record book, if one was used to record the original marriage certificates. Draw a line through any statement or statements which were incorrect and enter the correct information directly above. Do not erase any information from the original record.

If the original record was forwarded to the state registrar of vital records and statistics (see page 131), a copy of the Affidavit and Correction of a Record of Marriage (Form R-104) should be completed, both front and back, and forwarded to the registrar.

D. FEE

The fee for correcting a marriage record is $2.00 unless your town meeting has voted a different fee. The fee should be paid by the person requesting the correction. [262:34(45)]

VI. PERMANENT RECORDS [46:1,2]

A. GENERAL

Regardless of the method you use to record marriages, the certificates themselves are *permanent* legal records and must be properly protected and preserved. [46:2] (state retention schedule 2.124-2.127, 2.130, 2.131) (also see Chapter 66 of the General Laws covered elsewhere in the *Town Clerks Manual*)

Chapter 46, section 1 requires that each clerk shall receive or obtain and record the following facts relative to marriages for which intentions were filed in his town.

- date of record
- date of marriage
- place of marriage
- name, residence, and official station of the person by whom solemnized
- for each party to the marriage: present name, surname to be used after marriage, place of birth, residence, age, the number of the marriage and if previously married whether widowed or divorced, the occupation, and the birth-given name of the parents

NOTE: *You will find among your records prior to February 10, 1980, those of marriages for which intentions were not filed in your town.* *(see page 119)*

The commissioner of public health may require that additional information, as he deems necessary, be included on the certificate of marriage. [46:1]

B. FILING

1. Certificates of Marriage

The Certificates of Marriage (Form R-101) shall be conveniently arranged for examination, presumably in consecutive order by registered number. [46:2] The certificates may be permanently bound or retained in looseleaf binders. If you issue certified copies of records using some kind of copying equipment, the looseleaf binder will have an advantage. (see page 130 for information relative to issuing certified copies by photographic methods)

You may also copy from the certificates the information required to be recorded under 46:1 into a book kept specifically for the purpose although this is not necessary for compliance with the General Laws. The advantage of this method is that a large number of records may be kept together in a smaller space.

2. Delayed Record of Marriage and Out-of-State Record of Marriage

The Delayed Record of Marriage (Form R-106) and the Out-of-State Record of Marriage (Form R-107) should be filed with the marriage certificates (Form R-101) of the year in which the marriage took place and assigned a registered number in the regular order for that year. The documentary

evidence or a copy thereof, attested to by the clerk, should be retained and filed with the delayed record or the out-of-state record.

The information on the delayed or out-of-state record should be entered in the marriage record book, if one is used, with other records for the year in which the marriage occurred.

3. Affidavit and Correction

Affidavit and Correction of a Record of Marriage, Form R-104, *must be filed separately* from the other marriage certificates. The documentary evidence or a copy thereof, attested by the clerk, should be retained and filed with the Form R-104.

If you use a record book to record the information on the affidavit and corrections, it must be a separate book from the one you use to record original marriage certificates and you must enter the name and residence of the person making the affidavit.

4. Impounded Records [46:2A,13]

a. illegitimate persons

A marriage certificate relating to an illegitimate person is an impounded record and not open to public inspection. These would be certificates on which the name of the father of either the bride or groom has been omitted.

b. certificate of pregnancy

A marriage certificate relating to a notice of intention with which a certificate of pregnancy has been filed [207:20A] is an impounded record and not open to public inspection.

NOTE: *The provisions for filing a certificate of pregnancy with the notice of intention under 207:20A were repealed by Chapter 684 of the Acts of 1981, effective March 23, 1982. Therefore, you will find marriage certificates impounded because of pregnancy certificates only among your records prior to that date.*

c. amended certificates

An original marriage certificate which has subsequently been amended is an impounded record and not open to public inspection.

See page 135 for those persons entitled to the information contained in an impounded record.

Impounded marriage certificates may be numbered in order along with the other marriage certificates received and filed with them. In addition, such marriages may be recorded along with all other marriages in your record book, if one is kept. If this arrangement is used, you would be justified in refusing to permit public inspection of the bound certificates or the record book.

However, you are required to permit inspection of that portion of the records that are public record if they can be segregated from the impounded records. For example, you are required to allow inspection of a page of your record book which does not contain any impounded entries, but this should be done only under supervision to assure that the examiner does not turn to a page containing an impounded record. (see 66:10)

5. Annulment of Marriage Previously Recorded [207:14]

The clerk or corresponding official of the court shall, within two days after the entry of a final decree annulling a marriage, send an attested copy thereof to the clerk of each city or town in the commonwealth where a party to the marriage dwelt at the time of the marriage and to the clerk of the city or town where the marriage was solemnized.

If you receive such a decree, you must note in the margin of the marriage record to which it relates a reference to the decree of annulment. If you keep a separate record book in addition to the certificates themselves, reference to the decree of annulment should be made *both* in the record book and on the certificate. File the annulment decree with the certificate to which it refers. Use this procedure *only* upon receipt of a decree from a Massachusetts court.

NOTE: *207:14 requires the court to send a copy of the annulment decree to the clerk of each city or town in which a marriage was required to be recorded prior to February 10, 1980, the effective date of Chapter 718 of the Acts of 1979. If you receive an annulment decree related to a marriage which took place on or after February 10, 1980,*

you may or may not have the marriage recorded. If you do not, return the annulment decree to the court with a note informing it that you have no record of the marriage on file.

C. INDEXING

An index of all marriage certificates received and recorded must be kept and each entry shall be numbered in its order. [46:2] A bound index book may be used.

An index card filing system may also be used as an index to comply with 46:2.

SAMPLE INDEX CARD

JONES, MARY B. X:81:253
married: James R. White 9 August 1979 in Cambridge
bride from Sudbury
groom from Cambridge

The entry in the right hand top corner is X (volume number), 81 (page number), 253 (registered number). If you do not use a record book, "1979:253" may be substituted to show that the certificate is number 253 of 1979.

A similar card should be prepared substituting the groom's name for the bride's at the top left.

Although additional information may be included on the card, it is not necessary for sufficient identification of the record and for quick reference.

VII. RETURNS TO THE STATE REGISTRAR OF VITAL RECORDS AND STATISTICS [46:17]

A. GENERAL

In preparing copies for forwarding to the state registrar, use a typewriter or print clearly by hand using black Massachusetts standard ink. The certified copies should be sent to:

Registry of Vital Records and Statistics
McCormack Building, First Floor
One Ashburton Place
Boston, MA 02108

Self-addressed envelopes in which to enclose your copies are available from the state registrar. (Form R-322)

Be sure that the certificates forwarded have been signed. Proofread each certificate prior to forwarding, unless you use the photographic method outlined below.

Chapter 46, section 18 allows for the photographic or micro-photographic process for copying records to be forwarded to the state registrar. However, the following conditions must be met:

- paper must be 100% rag content, 24 pound weight, white
- the reproduction must be clear and sharp and must be cut to 6 1/4" x 8 1/2" after reproduction (the size of the original certificate)
- there can be no erasures, strike overs, or cross-outs on the original record
- each copy must have the clerk's attestation on the reverse side. Facsimile signatures may be used. Be sure that your attestation is not on the margin end of the certificate since it would later be hidden in the binding.

Prior to using this method for the first time, send a sample of the copy you intend to use to the state registrar for his approval.

B. MONTHLY RETURNS [46:17]

On or before the 10th day of the second month following every month in which marriages are solemnized, the clerk shall transmit to the state registrar certified copies of such marriage records. For example, copies of marriage certificates received by you in January should be sent to the state registrar on or before March 10th.

Prior to forwarding the copies, be sure you have signed each using your full name, not just your initials. Be sure the copies of Form R-101, Certificate of Marriage, contain the place and date of marriage under items 1 and 2, that the intention number and the registered number have been entered, and that the city or town making the return has been entered at the top right hand corner. Add any explanatory notes which appear on the original

records such as waiver of waiting period on file, medical certificates on file, court order on file, etc. You do not need to include in the left hand margin the expiration date of the certificate.

If you are forwarding a copy of an impounded record, stamp or type "impounded" or "imp." in the space to the left of city or town making return.

1. Marriages Solemnized in Massachusetts

The only Massachusetts marriage certificates which will be received and recorded by you are those for which a notice of intention has been filed in your office. A copy of each of these certificates should be forwarded to the state registrar.

2. Marriages Solemnized Outside of Massachusetts

If you have recorded an out-of-state marriage on a Form R-107, make a copy using Form R-107 and forward it to the state registrar. (see page 117)

3. Delayed Records (Form R-106) and Affidavits and Corrections (Form-R-104)

For marriages relating to intentions filed on or after February 10, 1980, copy and forward all delayed records on Form R-106, and all affidavits and corrections on Form R-104.

For marriages relating to intentions filed before February 10, 1980, forward a copy of the delayed record or affidavit of correction only under the following circumstances:

- the bride was a resident of your town at the time of the marriage
- the bride was an out-of-state resident and the groom was a resident of your town at the time of the marriage
- the bride and the groom were both out-of-state residents but filed intentions in your town

4. Ordering Forms

At the time you make out your monthly report for the state registrar, check your supply of marriage certificate forms. If forms are needed, note what is needed on the order form (Form R-501) and enclose it with your monthly report. (see sample form, page 49)

C. ANNUAL REPORT [46:17] (see sample form, page 153)

The city or town clerk shall annually, not later than March 1st, report to the state registrar on forms furnished by him (Form R-329), the following information:

- total number of intentions filed (January 1st through December 31st of the previous year)
- total number of licenses issued
- total number of licenses not issued
- total number of licenses issued but not returned

Although the law provides that the annual return must be made not later than March 1st of each year, it is conceivable that this due date could prove impracticable. For example, the license for an intention filed December 31st would be valid until the next March 1st, except in leap year. If it were used on March 1st, the minister would not be required to return it to you until the 10th of April [207:40]. Therefore, if you wait until after April 10th to return Form R-329, you will have a more complete report. However, if you know that all licences have been returned prior to April 10th, you can send in a complete report earlier. If, after having sent in your annual report, you should receive an additional certificate for that year, you should forward a copy to the state registrar as usual.

When preparing your annual report, if there are outstanding licenses, contact the parties to determine the disposition of the license. If it has been used, advise them to contact the minister to remind him to file the signed license. Otherwise there will be no record of the marriage and the minister is liable to a $20-$100 fine for failure to file. [207:56]

If you have difficulty in getting the minister to comply with the law, seek assistance from a superior in the church or from the state registrar.

If the license has not been used, advise the applicant to return it to you as required by 207:28. The license must be either used or returned to you unused within sixy days of the date of filing intentions. Occasionally it will be impossible to have the license returned as the license may have been lost or destroyed.

By making out your annual report and contacting the applicants or the minister, you can usually account for every license used. In many cases, a minister who simply neglected to make a return will do so after being reminded, thereby precluding problems which might arise should the marriage fail to be recorded.

In the larger communities, it would probably be advisable to check on unreturned licenses shortly after they become overdue instead of waiting until the annual report is due.

A checklist may be prepared to assist you in keeping track of the issued licenses as follows:

Int. #	Names of Parties	Date Int. Filed	Date Cert. Issued	Date Cert. Returned
1	Smith-Jones	Jan 2, 1980	Jan 7, 1980	Feb 4, 1980
2	Brown-White	Jan 8, 1980	Jan 14, 1980	Mar 3, 1980
3	Williams-Scott	Jan 15, 1980	Jan 21, 1980	
4	Ames-Lawrence	Feb 1, 1980	Feb 4, 1980	Mar 17, 1980

If the checklist is kept up to date, you can tell at a glance what licenses are overdue.

D. FEES FOR FORWARDING COPIES OF RECORDS [46:26]

The following fee shall be paid to town clerks for forwarding copies of marriage records:

- $1.00 per record (Form R-101) forwarded to the state registrar, after presentation to the town treasurer of a certificate of receipt signed by the state registrar

This fee would be paid by the town and would need to be appropriated at town meeting thereby being subject to limitation by the town. Generally a town clerk who is paid partially or fully by appropriated salary is considered to have received the "fees" under section 26. A town clerk who is paid entirely by fees might be entitled to additional compensation under this section.

VIII. PREPARING A CERTIFIED COPY OF A MARRIAGE RECORD

A. GENERAL [46:19]

A certified copy of a marriage record, signed and sealed by the city or town clerk, or assistant clerk, is admissable in court as evidence of such a record. Forms to be used in issuing certified copies may be made up by the city or town, or purchased from a commercial supplier. The state registrar does not furnish these forms.

You are required, upon request and payment of the required fee, to furnish copies of all those records not impounded.

B. AMENDED, CORRECTED, OR SUPPLEMENTED RECORDS

If you furnish a copy of a corrected record, you must certify to the facts as corrected, amended, or supplemented, without making reference to the fact that such record has been corrected, amended, or supplemented. However, if you receive a proper judicial order, or are requested by a person whose official duties, in your opinion, entitle him to the information contained in the original record, you must furnish a copy of the original record. Officials who might be entitled to a copy of the original record are a registrar of deeds, a welfare official, a passport official, etc. It is very unlikely that you will receive such a request.

Enter on the copy both the original date of record and the date the original record was amended.

C. ANNULLED MARRIAGE

If you should issue a certified copy of a marriage record after the decree of annulment has been received, note on the copy that the marriage was annulled and include the date of annulment and the probate court from which the annulment was received.

D. LONG FORM

The long form contains all the information relative to the parties to the marriage that appeared on the original certificate, including information relative to the minister. It should also include the registered number of the certificate and the date you received it in your office (date of record). If a separate record book is used, the form should also contain the volume and page number of the book in which the marriage is recorded. In addition, the clerk's certificate must appear. This certificate must be completed and signed by the clerk or assistant clerk and the official town seal affixed. [46:29] (see sample long form, page 154)

To prepare a long form, simply copy the information from your record and enter it in the appropriate spaces on the form. If the record relates to a marriage prior to August 4, 1971 (see Chapter 254 of the Acts of 1971) color will appear on the original and must be entered on the certified copy unless you receive a written request to omit the color. If the commercial form has no specific space for color, type it in where there is room, for example, on the line for age.

If an original record has been amended, copy the information as amended, except under certain circumstances. (see B above)

If you wish, you may make a copy of the original certificate using a photographic process. Leave space below the copy of the certificate so that you will have room to add your attestation and to affix the seal. If your original record has been amended, you may not use this method since the original information should not appear on the certified copy except under certain circumstances. (see page 134) Special paper does not need to be used for copies issued to the public.

FEE: For certified copy, long form: $2.00 [262:34(44)], unless your town meeting has established a different fee.

E. ABSTRACT

Upon request for an abbreviated record of marriage, the clerk or assistant clerk shall make an abstract of the record without notation thereon of the names of the parent(s), except by request of the applicant. Generally, an abstract contains the name of the groom, the name of the bride, the date of marriage, the place of marriage, and the clerk's attestation. It may also contain space for the year, volume, page number, and date of record. (see sample form, page 155)

FEE: For certified copy, abstract: $1.00 [262:34(44A), unless your town meeting has established a different fee.

NOTE: *No fee is to be charged for a copy of a marriage record relating to a veteran provided that such copy is for use in relation to a claim against the United States or the commonwealth.* [262:46A]

F. IMPOUNDED RECORDS [46:2A]

Copies of impounded records of marriage may *not* be issued to any person except upon proper judicial order, upon request of a person seeking his/her own marriage record, or his/her attorney, parent, guardian, conservator, or a person whose official duties, in the opinion of the clerk, entitle him to the information contained therein. These provisions do not apply to marriage records recorded or filed prior to January 1, 1841. [46:2A]

Impounded marriage records *should not* be published in the annual town report.

G. REPRODUCING OF CERTIFICATES OR RECORDS BY UNAUTHORIZED PERSONS [46:19A]

Reproducing a certified copy or an original record by any person other than the town clerk, assistant clerk, state registrar of vital records and statistics, or one of his deputies shall be prohibited.

EXCEPTION: A registrar of deeds, registrar of probate, or other county, state, municipal, or federal keeper of public records may, in the course of his official duties, reproduce such certificates or records as are required by his office.

IX. VALIDITY OF MARRIAGE

A. GENERAL

The record of a marriage made and kept by the person by whom the marriage was solemnized or by the town clerk, or a certified copy thereof, shall be prima facie evidence of such marriage. [207:45]

A copy of the record of a marriage solemnized by a consul or diplomatic agent of the United States or a certificate from such consul or agent shall be prima facie evidence of such marriage. [207:46]

B. LACK OF AUTHORITY OF MINISTER - OMMISSION OR INFORMALITY IN NOTICE OF INTENTION

A marriage shall not be void, nor shall the validity of the marriage be in any way affected if the person who solemnized the marriage professed to have the authority to do so but did not have such authority, or if there was an ommission or informality in the manner of filing the notice of intention, provided the marriage is in other respects lawful and is consummated with a full belief of either of the persons so married that they have been lawfully married. [207:42]

C. FOREIGN MARRIAGES

Marriages solemnized in a foreign country by a consul or diplomatic agent of the United States shall be valid in this commonwealth. [207:43]

D. IMPEDIMENTS TO MARRIAGE SUBSEQUENTLY REMOVED

If, during the lifetime of a husband or wife with whom a marriage is in force, a person enters into a subsequent marriage

contract with due legal ceremony, the marriage shall be held to be valid from and after the removal of the impediment by death or divorce of the other party to the former marriage, provided that:

- the marriage contract was entered into by one of the parties in good faith, in full belief that the former husband or wife was dead, that the former marriage had been annulled by divorce, or without knowledge of the former marriage, and
- the parties continue to live together as husband and wife in good faith on the part of one of them.

The issue of such subsequent marriage shall be considered as the legitimate children of both parents. [207:6]

E. VALIDITY OF MARRIAGE IN DOUBT - REMEDY

If the validity of a marriage is doubted, either party may apply to the probate court for a review and determination of such validity. [207:14]

If you should be asked a question concerning this, advise the individual to consult a lawyer.

F. VOID MARRIAGES

- A marriage solemnized within the commonwealth which is prohibited by reason of consanguinity (close blood relationship) or by affinity (close relationship by marriage) between parties or by reason of either of them having a former wife or husband living, shall be void without a decree of divorce or other legal process. [207:8]
- If any person residing and intending to continue to reside in the commonwealth, if disabled or prohibited from contracting marriage under the laws of the commonwealth, goes into another jurisdiction and there contracts a marriage, such marriage shall be null and void for all purposes in the commonwealth. [207:10]
- No marriage shall be contracted in this commonwealth by a party residing and intending to continue to reside in another jurisdiction if such marriage would be void if contracted in such other jurisdiction, and every marriage contracted in this commonwealth in violation of this provision shall be null and void. [207:11]

X. PENALTIES

A. ON CLERKS

- for refusing or neglecting to perform any duty required under Chapter 46 - fine of not less than $20.00, nor more than $100.00. [46:27]

- issuing a marriage license without first obtaining medical certificates - fine of not less than $10.00, nor more than $100.00. [207:28A]

- knowingly issuing a Certificate of Marriage to a party residing and intending to reside in another jurisdiction if such marriage would be void if contracted in such other jurisdiction - fine of not less than $100.00, nor more than $500.00 or by imprisonment for not more than one year, or both. [207:50]

- violations of sections 7, 26, or 34, upon complaint made within one year thereafter - fine of not more than $500.00 or by imprisonment for not more than one year. [207:51]

- violation of section 20 (requirement for written notice of intention) - fine of not more than $100.00. [207:52]

- issuing Certificate of Marriage prior to expiration of waiting period without a waiver; issuing a Certificate of Marriage to minor without court order - fine of not more than $100.00. [207:53]

B. ON PERSONS SOLEMNIZING MARRIAGES

- for solemnizing a marriage of persons who have not complied with the law relative to filing intentions and obtaining a certificate - fine of not more than $500.00. [207:49]

- for solemnizing marriage of minors without court order - fine of not more than $500.00 or by imprisonment for not more than one year. [207:51]

- for solemnizing a marriage without being duly authorized to do so - fine of not more than $500.00 or imprisonment for not more than one year, or both. [207:48]

- for neglecting to make records and returns required by section 40 - fine of not less than $20.00 nor more than $100.00. [207:56]

- performing a ceremony of marriage using a certificate more than 60 days after the notice of intention was filed - fine of not more than $10.00. [207:57]

- advertising in a newspaper circulated in the commonwealth, or by any other means, to perform or to procure the performance of a marriage ceremony - fine of not less than $10.00 nor more than $100.00. [207:58]

C. ON OTHERS

1. Physicians

For failure to comply with the requirements of 207:28A relative to medical certificates - fine of not less than $10.00 nor more than $100.00. [207:28A]

2. Individuals

- for giving notice of intention of marriage without consent of the party whose name was used - liable in damages [207:26] - fine of not more than $500.00 or by imprisonment for not more than one year, or both. [207:51]

- for falsely swearing or affirming in making any statement required on Notice of Intention of Marriage - fine of not more than $100.00. [207:52]

- making an illegal alteration or erasure on a Certificate of Marriage - fine of not more than $100.00. [207:54]

- reproducing a certified copy of marriage record - fine of not more than $100.00. [46:19A]

Penalty for any of the following is a fine of not more than $500.00, or imprisonment for not more than six months in a house of correction.

- falsely making, altering, forging, counterfeiting a copy of a marriage record.

- procuring or assisting another to falsely make, forge, or counterfeit such a copy.

- forging or using without authority the signature, facsimile signature or validating stamp of a city or town clerk, or the state registrar upon a genuine or falsely made copy.

- uttering, publishing as true, or in any way making use of a falsely made, altered, forged, or counterfeit copy.

- using or attempting to use, with intent to defraud or deceive, a copy of a record of marriage of a person other than himself. [46:30]

1/82

FORM R-105 – 60M – 11/78 phr

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

Page .....

No. 2

Fee paid
Medical Certs. rec'd

NOTICE OF INTENTION OF MARRIAGE

(PLEASE PRINT)

January 27 1982

TO THE Town CLERK OF East Cupcake MASS.

SIR: The following notice of intention of marriage is hereby given in compliance with law.

GROOM	BRIDE
Present Name, William Howard Fuller	Present Name, MARY ALICE KETTLE
Surname to be used after marriage, Fuller	Surname to be used after marriage, FULLER
Age, 28	Age, 22
RESIDENCE: 10 Carey Lane (Street and Number)	RESIDENCE: 114 WATERMAN AVE (Street and Number)
Dennett MA (City or town) (State or country)	E. CUPCAKE MA (City or town) (State or country)
Marriage, first, second, etc. 3rd	Marriage, first, second, etc. 1 ST
(Widowed or divorced) Div., Wid.	(Widowed or divorced) —
Occupation, Architect	Occupation, SECRETARY
BIRTHPLACE: Hooten Hollow ME (City or town) (State or country)	BIRTHPLACE: COLDSPOT CONN. (City or town) (State or country)
Father's name Hughes L. Fuller	Father's name THOMAS M. KETTLE
Mother's name Martha C. Milton (Given) (Maiden)	Mother's name MILDRED SHAUGHNESSY (Given) (Maiden)

G.L. Ch. 46, Sec. 1D — Each party to a marriage may adopt any surname, including but not limited to the present or birth-given surname of either party, may retain or resume use of a present or birth-given surname, or may adopt any hyphenated combination thereof.

Penalty: G.L. Ch. 207, Sec. 52 . . . . whoever falsely swears or affirms in making any statement required . . . . . shall be punished by a fine of not more than one hundred dollars.

I, We, hereby state that there is an absence of any legal impediment to the marriage and do hereby depose and say that all of the statements as set forth in the above notice whereof I, We, could have knowledge are true and are made under the penalties of perjury (Chap. 4, Sect. 6, Rule 6 General Laws.)

Applicants { William H. Fuller
Mary Alice Kettle

Subscribed and sworn to, before me, this 27th day of January A.D., 1982

Carol L Smith
(Registrar, Clerk or Assistant Clerk designated to administer oaths)

Marriage Certificate Issued 2 - 4 1982

Not Valid After 3 - 28 , 1982

(Date to be inserted in this item and on certificate is 60 days from date on which this intention is filed Chap. 207, Sect. 20)

PROOF OF AGE SUBMITTED

1. An original or certified copy of a record of birth
2. An original or certified copy of a baptismal record
3. A passport
4. A life insurance policy
5. An employment certificate
6. A school record
7. An immigration record
8. A naturalization record
9. A court record

I AM SATISFIED THAT DOCUMENTARY EVIDENCE OF A HIGHER GRADE IS NOT READILY PROCURABLE.

.....

(Registrar, Clerk or Assistant Clerk or Clerk designated to administer oaths)

FOR PERSONS UNDER 18 YEARS OF AGE A COURT ORDER IS REQUIRED:
See Chapter 207, Sections 24 & 25.

IMPOUNDED 143

1/82 FORM R-105 - 60M - 11/78 phr

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

Page ..... No. 3

Fee paid
Medical Certs rec'd
Waiver of waiting period rec'd

NOTICE OF INTENTION OF MARRIAGE

(PLEASE PRINT)

January 29 1982

TO THE Town CLERK OF Midtown MASS.

SIR: The following notice of intention of marriage is hereby given in compliance with law.

GROOM	BRIDE
Present Name, James Francis Brown	Present Name, Paula Joan Worth
Surname to be used after marriage, Brown	Surname to be used after marriage, Worth-Brown
Age, 21	Age, 19
RESIDENCE:	RESIDENCE:
14 Center St. (Street and Number)	14 Center St (Street and Number)
Smalltown (City or town) MA (State or country)	Smalltown (City or town) MA (State or country)
Marriage, first, second, etc. 1st	Marriage, first, second, etc. 1st
(Widowed or divorced) —	(Widowed or divorced) —
Occupation, Technician	Occupation, Assembler
BIRTHPLACE:	BIRTHPLACE:
Pasadena (City or town) CA (State or country)	Largetown (City or town) MA (State or country)
Father's name William B. Brown	Father's name —
Mother's name OK* Mary R. Brown (Given) (Maiden)	Mother's name Sarah N. Jones (Given) (Maiden)

G.L. Ch. 46, Sec. 1D — Each party to a marriage may adopt any surname, including but not limited to the present or birth-given surname of either party, may retain or resume use of a present or birth-given surname, or may adopt any hyphenated combination thereof.

Penalty: G.L. Ch. 207, Sec. 52 . . . . whoever falsely swears or affirms in making any statement required . . . . . shall be punished by a fine of not more than one hundred dollars.

I, We, hereby state that there is an absence of any legal impediment to the marriage and do hereby depose and say that all of the statements as set forth in the above notice whereof I, We, could have knowledge are true and are made under the penalties of perjury (Chap. 4, Sect. 6, Rule 6 General Laws.)

Applicants { James Francis Brown
Paula Joan Worth

Subscribed and sworn to, before me, this 29th day of January A.D., 1982

Carole L Smith
(Registrar, Clerk or Assistant Clerk designated to administer oaths)

Marriage Certificate Issued 1-29 1982

Not Valid After 3-30 , 1982
(Date to be inserted in this item and on certificate is 60 days from date on which this intention is filed Chap 207, Sect. 20)

PROOF OF AGE SUBMITTED

1. An original or certified copy of a record of birth
2. An original or certified copy of a baptismal record
3. A passport
4. A life insurance policy
5. An employment certificate
6. A school record
7. An immigration record
8. A naturalization record
9. A court record

I AM SATISFIED THAT DOCUMENTARY EVIDENCE OF A HIGHER GRADE IS NOT READILY PROCURABLE.

....

(Registrar, Clerk or Assistant Clerk or Clerk designated to administer oaths)

FOR PERSONS UNDER 18 YEARS OF AGE A COURT ORDER IS REQUIRED:
See Chapter 207, Sections 24 & 25.

1/82

FORM PM-V8 8-79 D4599 78

MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

PREMARITAL MEDICAL CERTIFICATE FORM
(General Laws, Chapter 207)

I*, Frederick C. Allen of 350 Commonwealth Avenue
(no.) (street)

Midtown, MA a physician registered or licensed to practice in the State (or
(city)

Territory) of Massachusetts certify that on January 5, 1982
(date)

I examined Mary Alice Kettle

of 114 Waterman Avenue, East Cupcake, MA This examination
(no.) (street) (city or town) (state)

included a serologic test for syphilis taken on January 5, 1982 and performed
(date)

at State Serology Lab, Jamaica Plain, MA on January 8, 1982
(name and address of laboratory) (date)

I also certify that (check one):

[ ] a test for susceptibility to rubella was performed and the patient informed of the significance of the results. This test was performed at.....
(name and address of laboratory)

.....on.....
(date)

[X] a test for susceptibility to rubella was not performed because of patient refusal or absence of medical indication. Had German Measles.

(The above two statements do not apply to males).

In view of the medical history, physical examination, and blood test report, it is my opinion that the person whose signature appears below is not prohibited from receiving a certificate under the provisions of Section 28.

Signature of Applicant

Mary Alice Kettle — Frederick C. Allen
(to be signed in presence of physician) (signature of physician)

*If a Medical Officer of the Armed Forces or the Public Health Service, give rank, serial number, branch of service, and name of station.

FORM R-101 1/82

NOT VALID AFTER March 28, 1982

THIS IS A PERMANENT RECORD. Use only durable black ink or approved black typewriter ribbon. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN. PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS

SEE CHAP 207, §§ 28, 28A, 48, 49, 54, 57 and CHAP 46, § 18

THIS CERTIFICATE IS NOT TO BE USED OUTSIDE OF MASSACHUSETTS.

60M - 5/78 PHR Medical certificates filed.

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same

(State number file) East Cupcake (City or town making return)

Registered No. 3

Intention No. 2

1 Place of Marriage — City or Town (Do not enter name of village or section of city or town) Winston

2 Date of Marriage (Month) Feb. 14, (Day) (Year) 1982

	GROOM	BRIDE
3 FULL NAME	William Howard Fuller	12 FULL NAME: Mary Alice Kettle
3A SURNAME AFTER MARRIAGE	Fuller	12A SURNAME AFTER MARRIAGE: Fuller
4 AGE	28	13 AGE: 22
5 OCCUPATION	Architect	14 OCCUPATION: Secretary
6 RESIDENCE NO. / STREET	10 Carey Lane	15 RESIDENCE NO. / STREET: 114 Waterman Ave
CITY OR TOWN / STATE	Dennett / MA	CITY OR TOWN / STATE: E. Cupcake / MA
7 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.)	3rd	16 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.): 1st
8 WIDOWED OR DIVORCED	Div. Wid.	17 WIDOWED OR DIVORCED: --
9 BIRTHPLACE (City or town)	Hooten Hollow	18 BIRTHPLACE (City or town): Coldspot
(State or country)	ME	(State or country): CONN
10 NAME OF FATHER	Hughes L. Fuller	19 NAME OF FATHER: Thomas M. Kettle
11 MAIDEN NAME OF MOTHER	Martha C. Milton	20 MAIDEN NAME OF MOTHER: Mildred Shaughnessy

21 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or Town) of East Cupcake (Name of city or town) according to law, this 27th day of January 1982

Certificate issued (Month) Feb. 4 (Day) 1982 (Year) by Carole L. Smith (City or Town Clerk or Registrar)

22 I HEREBY CERTIFY that I joined the above-named persons in marriage at No First Baptist Church St (If marriage was solemnized in a church, give its NAME instead of street and number) Winston (Name of city or town) on February 14, 1982 (Month) (Day) (Year)

Signature Henry L. Tuttle

HENRY L. TUTTLE (Print or type name)

Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 16 Devereux St., City or Town of Winston MA

23 Certificate received by city or town clerk (Month) February (Day) 18, (Year) 1982

Carole L. Smith CLERK OR REGISTRAR

FORM R-101 1/82

NOT VALID AFTER March 30, 1982

THIS IS A PERMANENT RECORD Use only durable black ink or approved black typewriter ribbon Every item of information should be carefully supplied ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN, PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS

SEE CHAP 207, §§ 28, 28A, 48, 49, 54, 57 and CHAP 46 § 18

THIS CERTIFICATE IS NOT TO BE USED OUTSIDE OF MASSACHUSETTS.
Medical Certificates on file
Waiver of waiting period on file

60M - 5 '78 PHR

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

CERTIFICATE OF MARRIAGE IMP.

(State number file) Midtown (City or town making return)

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same

Registered No. 5

1 Place of Marriage — City or Town (Do not enter name of village or section of city or town) Smalltown

2 Date of Marriage January 30, 1982 (Month) (Day) (Year) Intention No. 3

	GROOM	BRIDE
3 FULL NAME	James Francis Brown	
12 FULL NAME		Paula Joan Worth
3A SURNAME AFTER MARRIAGE	Brown	
12A SURNAME AFTER MARRIAGE		Worth-Brown
4 AGE	21	
5 OCCUPATION	Technician	
13 AGE		19
14 OCCUPATION		Assembler
6 RESIDENCE NO. STREET	14 Center	
CITY OR TOWN STATE	Smalltown MA	
15 RESIDENCE NO. STREET		14 Center
CITY OR TOWN STATE		Smalltown MA
7 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.)	1st	
8 WIDOWED OR DIVORCED	--	
16 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.)		1st
17 WIDOWED OR DIVORCED		--
9 BIRTHPLACE (City or town)	Pasadena	
(State or country)	GA	
18 BIRTHPLACE (City or town)		Largetown
(State or country)		MA
10 NAME OF FATHER	William B. Brown	
19 NAME OF FATHER		--
11 MAIDEN NAME OF MOTHER	Mary R. Brown * (OK)	
20 MAIDEN NAME OF MOTHER		Sarah N. Jones

21 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or Town) of Midtown (Name of city or town) according to law, this 29th day of January 1982

Certificate issued January 29, 1982 (Month) (Day) (Year) by Carole L Smith (City or Town Clerk or Registrar)

22 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 14 Center St. (If marriage was solemnized in a church, give its NAME instead of street and number) Small town (Name of city or town) on January 30 1982 (Month) (Day) (Year)

Signature Mary R. Jutle
Henry L Tuttle (Print or type name)

Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 16 Dorcas Ave St., City or Town of Winston, MA

23 Certificate received by city or town clerk March 1, 1982 (Month) (Day) (Year) Carole L Smith CLERK OR REGISTRAR

FORM R-102

MARGIN RESERVED FOR BINDING

N.B.—THIS IS A PERMANENT RECORD. Use only STATE APPROVED black ink, black typewriter ribbon or black carbon paper. Every item of information should be carefully supplied. NO CERTIFICATE WITH ERASURES OR ALTERATIONS WILL BE ACCEPTED.

FOR INFORMATION ONLY

NOT USED AFTER 3/23/82

The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

COPY OF CERTIFICATE OF MARRIAGE

This form is to be used by clerks of cities and towns for making a return to the Department of Public Health of a marriage of a resident of his city or town which was solemnized outside the Commonwealth.

Smalltown (City or town making return)

15 Registered No.

1 Place of Marriage: Orangeburg (City or town) PA (State)	2 Date of Marriage: February 26, 1975 (Month) (Day) (Year)
3 FULL NAME GROOM: John C. Jones	12 FULL NAME BRIDE: Mary Alice Williams (Also maiden name, if widowed or divorced)
4 AGE AT LAST BIRTHDAY: 24 (Years)	13 AGE AT LAST BIRTHDAY: 23 (Years)
5 RESIDENCE: 14 First Street, Smalltown, MA	14 RESIDENCE: 61 Second Street, Largetown, NH
6 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.): 1st; 7 WIDOWED OR DIVORCED: --	15 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.): 1st; 16 WIDOWED OR DIVORCED: --
8 OCCUPATION: Lawyer	17 OCCUPATION: Secretary
9 BIRTHPLACE: Smalltown (City or town) MA (State or country)	18 BIRTHPLACE: Woodland (City or town) NH (State or country)
10 NAME OF FATHER: William B. Jones	19 NAME OF FATHER: Thomas M. Williams
11 MAIDEN NAME OF MOTHER: Maude A. Brown	20 MAIDEN NAME OF MOTHER: Alice R. Best

21 THE ABOVE-NAMED PERSONS WERE JOINED IN MARRIAGE AT NO First Parish Church ST (If marriage was solemnized in a church, give its NAME instead of street and number)

Orangeburg (Name of City or Town) PA (State) ON February 26, 1975 (Month) (Day) (Year)

NAME Harry R. White OFFICIAL STATION Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

RESIDENCE NO. 25 Third ST., CITY OR TOWN OF Orangeburg, PA

22 Certificate received by registrar or clerk March 27, 1975 (Month) (Day) (Year)

Carole L Smith
CITY OR TOWN CLERK OR REGISTRAR

BM-3/79

FORM R-103

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY WITH UNFADING BLACK INK OR USE BLACK TYPEWRITER RIBBON — THIS IS A PERMANENT RECORD. This form is for the use of the person officiating when the parties to the marriage are not residents of the city or town in which the marriage is solemnized, and is to be filled out, properly attested and returned to the registrar or clerk of the city or town in which the marriage took place, on or before the tenth day of the month next following PENALTY FOR NEGLECTING TO MAKE RETURNS, ONE HUNDRED DOLLARS

FORM: R-103 — 40M — 11/78 phr

FOR INFORMATION ONLY

The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

NOT USED AFTER 2/10/80

COPY OF CERTIFICATE OF MARRIAGE

For the use of Clergyman or magistrate solemnizing marriage
(SEE INSTRUCTIONS ON MARGIN)

(City or town making return)

50 Registered No.

1 Place of Marriage: Smalltown (City or town) MA (State)	2 Date of Marriage: March 1, 1979 (Month) (Day) (Year)
3 FULL NAME GROOM: John R. Jones	12 FULL NAME BRIDE: Mary Alice Williams
3A SURNAME AFTER MARRIAGE: Jones	12A SURNAME AFTER MARRIAGE: Jones
4 AGE: 25; 5 OCCUPATION: Accountant	13 AGE: 25; 14 OCCUPATION: at home
6 RESIDENCE NO. 16 First STREET; CITY OR TOWN Largetown STATE MA	15 RESIDENCE NO. 93 Second STREET; CITY OR TOWN Midtown STATE NH
7 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.): 1st; 8 WIDOWED OR DIVORCED: --	16 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.): 1st; 17 WIDOWED OR DIVORCED: --
9 BIRTHPLACE: Danforth (City or town) OR (State or country)	18 BIRTHPLACE: Boston (City or town) MA (State or country)
10 NAME OF FATHER: William B. Jones	19 NAME OF FATHER: Thomas M. Williams
11 MAIDEN NAME OF MOTHER: Maude A. Brown	20 MAIDEN NAME OF MOTHER: Alice R. Best

21 To the Town (City or town) Clerk of Smalltown

I HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Marriage issued February 18, 1979 (Month) (Day) (Year)

by John P. White (Name of clerk) Clerk of the city (or town) of Largetown Massachusetts, an

that the persons named therein were joined in marriage by me, at No. First Baptist Church St (If marriage was solemnized in a church, give its NAME instead of street and number)

In the city (or town) of Smalltown on March 1, 1979 (Month) (Day) (Year)

Signature Harold P. Black Official station Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Print or type name Harold P. Black

Residence No. 6 Third Street St., City or Town of Smalltown

22 DATE RECEIVED April 2, 1979 Carole L Smith CLERK OR REGISTRAR

R-104
1/82

MARGIN RESERVED FOR BINDING — WRITE PLAINLY. WITH UNFADING BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON — THIS IS A PERMANENT RECORD

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

PLACE OF MARRIAGE

AFFIDAVIT AND CORRECTION OF A RECORD OF MARRIAGE

Smalltown
(City or Town making return)
Deposition No. 82-3

1 City or Town Smalltown (Do not enter name of village or section of city or town)
2 Date of Marriage June 15, 1980 (Month) (Day) (Year)
Registered No. 34
Intention No. 28

GROOM	BRIDE
3 FULL NAME: John Francis Jones	13 FULL NAME: Mary Alice Williams
3A SURNAME AFTER MARRIAGE: Jones	13A SURNAME AFTER MARRIAGE: Jones
4 AGE: 25	5 OCCUPATION: Accountant	6 COLOR:
14 AGE: 25	15 OCCUPATION: at home	16 COLOR:
7 RESIDENCE NO. 16 First STREET; CITY OR TOWN Smalltown STATE MA	17 RESIDENCE NO 93 Second STREET; CITY OR TOWN Midtown STATE NH
8 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.): 1st	9 WIDOWED OR DIVORCED: --	18 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.): 1st	19 WIDOWED OR DIVORCED: --
10 BIRTHPLACE: Danforth (City or town) OR (State or country)	20 BIRTHPLACE: Boston (City or town) MA (State or country)
11 NAME OF FATHER: William B. Jones	21 NAME OF FATHER: Thomas M. Williams
12 MAIDEN NAME OF MOTHER: Maude A. Brown	22 MAIDEN NAME OF MOTHER: Alice R. Best

23 THE ABOVE-NAMED PERSONS WERE JOINED IN MARRIAGE AT NO. First Parish Church ST. (If marriage was solemnized in a church, give its NAME instead of street and number)
Smalltown (Name of City or Town) ON June 15, 1980 (Month) (Day) (Year)
NAME Harold P. Black OFFICIAL STATION Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
RESIDENCE NO 6 Third ST., CITY OR TOWN OF Largetown, MA

24 DATE ORIGINAL CERTIFICATE OF MARRIAGE WAS FILED BY CITY OR TOWN CLERK June 25, 1980

25 The above corrections with reference to the statement on the back of this blank have been entered upon the marriage records of the town (City or Town) of Smalltown (Name of City or Town), in accordance with the provisions of General Laws, Chap. 46, Sec. 12, this 5th day of March 1982
and a copy of these corrections and affidavit has been transmitted to the Commissioner of Public Health

Carole L. Smith
(Clerk or Registrar)

DEPOSITION

ALL ADDITIONS AND CORRECTIONS MUST BE SUBSTANTIATED BY WRITTEN EVIDENCE (Sect. 13 of Chap. 46)

WRITE LEGIBLY WITH DURABLE BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON

The Commonwealth of Massachusetts
County of Midshire } ss.:

The undersigned, being duly sworn, depose and say that the record relating to the marriage of John Francis Jones and Mary Alice Williams (Give name of parties exactly as recorded on the original record) in the town (city or town) of Smalltown (Name of city or town),
does not fully and correctly state groom's father's name
Item(s) 10, and that the true statement of facts omitted or incorrectly stated in said record has been supplied by (Him or her) on the form of certificate on the other side of this blank.

SIGNATURE	RESIDENCE (City or town, street and number, if any)	Either Party to Marriage or Relative
John Francis Jones	61 Center St., Largetown, MA	groom

FURTHER, The written evidence submitted to substantiate the affidavit was:

Certified copy of groom's birth record.

Then personally appeared before me the person whose signature appear above and made oath that the statements subscribed to by him are true.

Date, March 5, 1982 Name Carole L. Smith

Official designation Town Clerk (City or town clerk, assistant clerk, or registrar)

MARGIN RESERVED FOR BINDING

FORM R-101

NOT VALID AFTER June 30, 1980

THIS IS A PERMANENT RECORD. Use only durable black ink or approved black typewriter ribbon. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN. PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS.
SEE CHAP. 207, §§ 28, 28A, 48, 49, 54, 57 and CHAP. 46, § 18.

THIS CERTIFICATE IS NOT TO BE USED OUTSIDE OF MASSACHUSETTS.

Medical certificates on file
* Deposition # 82-3

ORIGINAL CERTIFICATE AFTER CORRECTION

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same

(State number file) Smalltown
(City or town making return)
Registered No. 34
Intention No. 28

1 Place of Marriage — City or Town: Smalltown (Do not enter name of village or section of city or town)
2 Date of Marriage: June 15, 1980 (Month) (Day) (Year)

	GROOM	BRIDE
3 FULL NAME	John Francis Jones	12 FULL NAME: Mary Alice Williams
3A SURNAME AFTER MARRIAGE	Jones	12A SURNAME AFTER MARRIAGE: Jones
4 AGE	25	13 AGE: 25
5 OCCUPATION	Accountant	14 OCCUPATION: at home
6 RESIDENCE NO. / STREET	16 First	15 RESIDENCE NO. / STREET: 93 Second
CITY OR TOWN / STATE	Smalltown / MA	CITY OR TOWN / STATE: Midtown / NH
7 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.)	1st	16 NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.): 1st
8 WIDOWED OR DIVORCED	--	17 WIDOWED OR DIVORCED: --
9 BIRTHPLACE (City or town) / (State or country)	Danforth / OR	18 BIRTHPLACE (City or town) / (State or country): Boston / MA
10 NAME OF FATHER	* William ~~Willard~~ B. Jones	19 NAME OF FATHER: Thomas M. Williams
11 MAIDEN NAME OF MOTHER	Maude A. Brown	20 MAIDEN NAME OF MOTHER: Alice R. Best

21 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or Town) of Smalltown (Name of city or town) according to law, this 1st day of May 19 80
Certificate issued May 5, 1980 (Month) (Day) (Year) by Carole L. Smith (City or Town Clerk or Registrar)

22 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. First Parish Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)
Smalltown (Name of city or town) on June 15, 1980 (Month) (Day) (Year)
Signature Harold P. Black
Harold P. Black (Print or type name)
Official station Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
Residence No. 6 Third St., City or Town of Smalltown, MA

23 Certificate received by city or town clerk June 25, 1980 (Month) (Day) (Year) Carole L. Smith CLERK OR REGISTRAR

FORM R-106
1/82

MARGIN RESERVED FOR BINDING

N.B.—WRITE PLAINLY WITH UNFADING BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON—THIS IS A PERMANENT RECORD.
Every item of information should be carefully supplied. See reverse side for affidavit.

3M - 5/79 PHR

The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF VITAL RECORDS AND STATISTICS

DELAYED RECORD OF MARRIAGE

Midtown
(City or town making return)

1. PLACE OF MARRIAGE — City or Town: Midtown (Do not enter name of village or section of city or town) — 2 Date of Marriage: April 2, 1975 (Month) (Day) (Year) — Registered No. 68

GROOM	BRIDE
3 FULL NAME: John Francis Jones	13 FULL NAME: Mary Alice Williams (Also maiden name, if widowed or divorced)
4 AGE AT LAST BIRTHDAY (Years): 25	14 AGE AT LAST BIRTHDAY (Years): 25
5 COLOR:	15 COLOR:
6 RESIDENCE AT TIME OF MARRIAGE: 14 First Street, Smalltown, MA	16 RESIDENCE AT TIME OF MARRIAGE: 28 Second Street, Smalltown, MA
7 NUMBER OF MARRIAGE (1st, 2d, 3rd, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3rd, etc.): 1st
8 WIDOWED OR DIVORCED: --	18 WIDOWED OR DIVORCED: --
9 OCCUPATION: Accountant	19 OCCUPATION: Attorney
10 BIRTHPLACE (City or town): Danforth (State or country): OR	20 BIRTHPLACE (City or town): Boston (State or country): MA
11 NAME OF FATHER: William B. Jones	21 NAME OF FATHER: Thomas M. Williams
12 MAIDEN NAME OF MOTHER: Maude A. Brown	22 MAIDEN NAME OF MOTHER: Alice R. Best

23 THE ABOVE-NAMED PERSONS WERE JOINED IN MARRIAGE AT NO. First Parish Church ST.
(If marriage was solemnized in a church, give its NAME instead of street and number)

Midtown (Name of City or Town) ON April 2, 1975 (Month) (Day) (Year)

NAME Harold P. Black OFFICIAL STATION Minister
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

RESIDENCE NO. 6 Third ST., CITY OR TOWN OF Smalltown, MA

24 DATE ORIGINAL EVIDENCE OF MARRIAGE WAS FILED WITH THE CITY OR TOWN CLERK --

25 The above facts with reference to the statement on the back of this blank have been entered upon the marriage records of the TOWN (City or Town)
of Midtown (Name of City or Town), in accordance with the provisions of General Laws, Chap. 46, Sec. 18, this 5th day of March 19 82

and a copy has been transmitted to the Commissioner of Public Health — Carole L Smith (Clerk or Registrar)

NOTE: Do not send a copy to Boston - Smalltown would send copy.

REVERSE SIDE

AFFIDAVIT

WRITE LEGIBLY WITH DURABLE BLACK INK OR USE APPROVED BLACK TYPEWRITER RIBBON

The Commonwealth of Massachusetts
County of Midshire } ss.:

The undersigned, being duly sworn, depose and say that the record relating to the marriage of John Francis Jones (Give name of parties exactly as recorded on the original evidence) and Mary Alice Williams, has not been previously recorded, and that the true statement of facts has been supplied by her (Him or her) on the form of certificate on the other side of this blank.

SIGNATURE	RESIDENCE (City or town, street and number, if any)	Either Party to Marriage or Relative
Mary W Jones	61 Center St. Largetown, MA	bride

FURTHER, The written evidence submitted to substantiate the affidavit was:
Certified copy of marriage record from Smalltown, MA

Date, March 5, 1982

Then personally appeared before me the person whose signature appear above and made oath that the statements subscribed to by her are true.

Name Carole L Smith

Official designation Town Clerk
(City or town clerk, assistant clerk or registrar)

MARGIN RESERVED FOR BINDING

1/82
R-107

PLEASE TYPEWRITE — EXCEPT SIGNATURE — ALL COPIES MUST BE LEGIBLE
USE ONLY STATE APPROVED RIBBONS AND MASS. STANDARD INK
AS REQUIRED BY GEN LAWS. CHAP. 66 SECT. 4

The Commonwealth of Massachusetts
DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF
VITAL RECORDS AND STATISTICS

RECORD OF MARRIAGE
OUTSIDE OF COMMONWEALTH

(State use only)

Deposition No 82-4

Smalltown
(City or Town making this return)

Registered No. 15

1. PLACE OF MARRIAGE Orangeburg, PA (City or Town) (State or Country)	2. DATE OF MARRIAGE March 2, 1982 (Month) (Day) (Year)
3. FULL NAME GROOM: John C. Jones	12. FULL NAME BRIDE: Mary Alice Williams (Also maiden name, if widowed or divorced)
4. AGE AT LAST BIRTHDAY 24 (Years)	14. AGE AT LAST BIRTHDAY 23 (Years)
6. RESIDENCE AT TIME OF MARRIAGE 14 First St., Smalltown, MA	16. RESIDENCE AT TIME OF MARRIAGE 61 Second St. Largetown, NH
7. NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.) 1st; 8. WIDOWED OR DIVORCED --	17. NUMBER OF MARRIAGE (1st, 2nd, 3rd, etc.) 1st; 18. WIDOWED OR DIVORCED --
9. OCCUPATION Lawyer	19. OCCUPATION Secretary
10. BIRTHPLACE Smalltown (City or Town) MA (State or country)	20. BIRTHPLACE Woodland (City or Town) NH (State or country)
11. NAME OF FATHER William B. Jones	21. NAME OF FATHER Thomas M. Williams
12. MAIDEN NAME OF MOTHER Maude A. Brown	22. MAIDEN NAME OF MOTHER Alice R. Best

23. THE ABOVE-NAMED PERSONS WERE JOINED IN MARRIAGE AT First Parish Church ST
(If marriage was solemnized in a church, give its NAME instead of street and number)
Orangeburg, PA (City or Town) (State or country) ON March 2, 1982 (Month) (Day) (Year)
NAME Harry R. White OFFICIAL STATION Minister
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
RESIDENCE NO 25 Third Street ST, CITY OR TOWN OF Orangeburg, PA

24 The above facts with reference to the statement on the back of this blank have been entered upon the marriage records of the town (City or Town)
of Smalltown (Name of City or Town) in accordance with the provisions of General Laws, this 10th day of April 1982
and a copy has been transmitted to the Commissioner of Public Health

Carole L Smith
CITY OR TOWN CLERK OR REGISTRAR

3M - 5/81

REVERSE SIDE

AFFIDAVIT

THE COMMONWEALTH OF MASSACHUSETTS
COUNTY OF Midshire } ss.

The undersigned being duly sworn, desires that the record relating to the marriage of
John C. Jones to Mary Alice Williams
named on the reverse side of this form be recorded.

SIGNATURE	RESIDENCE (City or town, street and number, if any)	SPOUSE OR HEIRS-AT-LAW
John C. Jones	14 First St. Smalltown	groom

FURTHER, The documentary evidence submitted to substantiate this affidavit is:
Certified copy of marriage record from Orangeburg, PA

*Proof of residence 1982 Street Listing, Smalltown, MA

Then personally appeared before me the person whose signature appears above and made oath that the statements subscribed to are true

Name Carole L Smith
Official designation Town Clerk
(City or town clerk, assistant clerk, or registrar)
Date April 10, 1982

NOTICE

Expense of affidavit should be borne by the individual making return.
*Any of the following constitute sufficient evidence of residence at time of marriage.
1 - Street listing for year of marriage.
2 - Voters registration record for year of marriage
3 - If serviceman who entered service as a minor, parent's residence at time of service.

CITY AND TOWN CLERKS SHOULD TRANSMIT A COPY OF THIS RETURN TO THE COMMISSIONER OF PUBLIC HEALTH AT ONCE

R-329. 1M - 1/78 phr

The Commonwealth of Massachusetts

1/82

DEPARTMENT OF PUBLIC HEALTH
REGISTRY OF
VITAL RECORDS AND STATISTICS

To the Commissioner of Public Health:

Return of notices of intention of marriage filed in the city or town

of Midtown for the year 1981

NOTICE: This form to be filed with the Commissioner not later than March 1st.

(See Chapter 21 of the Acts of 1960.)

Total number of intentions filed (Jan. 1 through Dec. 31) 201

Total number of licenses issued for above 200

Total number of licenses not issued 1

Total 201

TOTAL NUMBER OF LICENSES ISSUED BUT NOT RETURNED
(Recipient should be requested to return unused
license as required by Chap. 207, Sect. 28) 0

Date March 15, 19 82 (Signed) Carole L. Smith

Clerk of Midtown
(Name of City or Town)

The Commonwealth of Massachusetts

UNITED STATES OF AMERICA

COPY OF RECORD OF MARRIAGE

TOWN of EAST CUPCAKE

I, the undersigned, hereby certify that I am clerk of the Town of East Cupcake that as such I have custody of the records of the marriages required by law to be kept in my office; that among such records is one relating to the marriage of

WILLIAM HOWARD FULLER and MARY ALICE KETTLE

FULLER (SURNAME AFTER MARRIAGE) and FULLER (SURNAME AFTER MARRIAGE)

and that the following is a true copy of so much of said record as relates to said marriage namely;

Date of Marriage February 14, 1982

Place of Marriage Winston, Massachusetts

GROOM	BRIDE
Present Name, William Howard Fuller	Present Name, Mary Alice Kettle
Surname to be used after marriage, Fuller	Surname to be used after marriage, Fuller
Age, 28	Age, 22
Residence: 10 Carey Lane, Dennett, MA	Residence: 114 Waterman Ave., East Cupcake, MA
Number of Marriage 3rd	Number of Marriage 1st
Widowed or divorced Div., Wid.	Widowed or divorced --
Occupation, Architect	Occupation, Secretary
Birthplace: Hooten Hollow, ME	Birthplace: Coldspot, CONN
Name of Father Hughes L. Fuller	Name of Father Thomas M. Kettle
Maiden Name of Mother Martha C. Milton	Maiden Name of Mother Mildred Shaughnessy

Name, residence and official station of person by whom married: Harry L. Tuttle, 16 Devereaux Street, Winston, MA

Date of Record February 19, 1982

And I do hereby certify that the foregoing is a true copy from said records.

Witness my hand and seal of said Town of East Cupcake

on this 20th day of April 19 82

Carole L. Smith
Clerk

Year 1982
Vol. IX
Page 63
No. 3

SEAL

Year 1982
Vol. IX
Page 63, NO. 3
Date of Record Feb. 14, 1982

The Commonwealth of Massachusetts

UNITED STATES OF AMERICA

Abstract of Record of Marriage

I, the undersigned, hereby certify that I am the Clerk of the Town of East Cupcake that as such I have custody of the records of marriages required by law to be kept in my office; that among such records is one relating to the marriage of

WILLIAM HOWARD FULLER AND MARY ALICE KETTLE

and that the following is a true abstract of so much of said record as relates to said marriage, namely:

Name of Groom William Howard Fuller

Name of Bride Mary Alice Kettle

Date of Marriage February 14, 1982

Place of Marriage Winston, Massachusetts

And I do hereby certify that the foregoing is a true abstract from said records.

SEAL

Witness my hand and Seal of said Town **of** East Cupcake **on this** 20th **day of** April **19** 82

Carole L. Smith
Clerk.

APPENDICES

APPENDIX A

REVIEWING A BIRTH CERTIFICATE, FORM R-3

Check each item on the certificate to be sure it has been properly entered. (Numbers below refer to item numbers on the Certificate of Birth)

item 1, a — county of birth: Check the name of the county where the birth occurred.

item 1, b — city or town: Check the name of the city or town. This should not be the name of a village or subsection of a municipality. Check to be sure the birth record belongs in your town.

item 1, c — name of hospital or street and number of place of birth: If the birth occurred in the hospital, or the mother and child were admitted to the hospital shortly after the birth, the full name of the hospital should be given. If the birth did not occur in a hospital, check the street and number of place of birth.

item 2 — given name: Be sure the given name or names are exactly as stated by the mother, for example: Mary Ellen or Maryellen, John or Jon. If the birth occurred in a hospital, the hospital staff should have checked this with the mother prior to forwarding the form to your office. If the given name or names have not been determined, the surname only will appear under item 2 above "LAST."

item 2 — surname: Ordinarily, the surname of the child will be the same as the father's name for a legitimate birth, and will be the same as the mother's for an illegitimate birth. However, under the court ruling in Secretary of the Commonwealth and others v. the City Clerk of Lowell and others [373 Mass 178], "the common law principle of freedom of choice in the matter of names extends to the name chosen by a married couple for their child." With respect to illegitimate children, the ruling states that the mother "has the same right to control the initial surname of the child as the parents of a legitimate child." The parents, or parent, have the right to name their child as they choose so long as there is no intent to defraud, be it the father's surname, the mother's maiden name, a hyphenated combination thereof, or any other surname they desire.

The designation "Jr.," "III," etc. may be used in the child's name. However, no correction can be made at a later time to remove "Jr.," or "III" from the name. These designations must remain on the birth record.

legitimate child: If the parents wish to give a surname to the child other than the father's surname, it is suggested that both parents sign the certificate under item 15 on Form R-3. Generally, the information is required to be given by the mother, and this

notation will indicate that both the mother and father agree to the name. Care should be taken that you do not become involved in any dispute between parents over the naming of their child.

If the mother of a legitimate child wishes to choose a surname different from her husband's for the child and the husband's whereabouts are unknown, the mother should sign under item 15 and note "husband's whereabouts unknown" should be added in the margin.

illegitimate child: For illegitimate births, the mother may choose the surname of the child and it may be different from the mother's maiden name. If so, there may be a notation "item 2 per mother's request" in the margin but this is not necessary as the mother will have signed the Form R-3. In this case, the father's name will not appear on the certificate. However, the natural father's name may appear on the certificate upon the written request of both parents. In this case, both parents must sign the certificate under item 15, and both may choose whatever surname they wish for the child.

item 3 — sex: This should be "male" or "female." (see page 24 for affidavits and corrections re change of sex) You may receive a certificate containing an entry "undetermined" under item 3. Such a certificate is an impounded record under 46:2A.

item 4 — this birth, single, twin, etc.: Specify the birth as single, twin, triplet, etc.

item 4, a — if not a single birth: Specify the order in which the child was born, first, second, etc. When a plural birth occurs, a separate certificate for each child must be filed. Certificates relating to the same multiple birth set must be filed at the same time.

item 5 — date of birth: Check the exact month, day, and year that the child was born. The name of the month should be spelled out or abbreviated, as Jan., Feb., etc. Numbers such as 1/4/81 for January 4, 1981 should not be used. Consider a birth at midnight to have occurred at the end of the day rather than the beginning of the next day.

item 5, a — hour of birth: Check to be sure that this item has been completed.

item 6 — full name of father:

legitimate births: A child born to a married woman is presumed to be the legitimate child of the mother and her husband and the full name of the husband should be entered under item 6, *except as follows:*

- the illegitimacy has been legally determined

- the illegitimacy has been admitted by the affidavit of both the mother and her husband. If the birth occurs in a hospital, the hospital is required to obtain the necessary affidavits from both the mother and her husband. These affidavits must accompany the Form R-3 sent to you by the hospital. For a home birth, you must obtain these affidavits.
- The mother has submitted an affidavit that her husband is not the father and that her husband's whereabouts are unknown. If the birth occurs in a hospital, the hospital will prepare the Form R-3 as illegitimate (no father's name entered under item 6) and will send it to you with the mother's affidavit. For a home birth, you must obtain the mother's affidavit. In either case, you must submit the affidavit and the Form R-3 containing no father's name entered under item 6 to your local probate or district court for approval prior to recording birth.

If a child is born to a woman who is widowed or divorced but whose child was conceived while she was still married, the birth must be recorded as legitimate including the husband's name under item 6, unless one of the exceptions above applies.

Any child born to a married woman as a result of artificial insemination with the consent of her husband, shall be considered the legitimate child of the mother and such husband. The husband's name should be included in item 6. [46:4B]

illegitimate births: For illegitimate births, the father's name cannot be entered under item 6, except upon the notarized written request of both the father and the mother. [46:1, Ch. 161 of the Acts of 1977] If the birth occurs in a hospital, the hospital must obtain these affidavits and forward them to your office with the Form R-3. A notation should appear in the left hand margin of Form R-3 "Paternity statements received."

The Form R-3 for an illegitimate child born to a widowed or divorced woman should contain a notation in the left hand margin showing the date of death of the husband, or the date on which the divorce became absolute as applicable.

A child is illegitimate if:

- the mother has never married
- the mother is divorced and the child was conceived after the divorce became absolute
- the mother is widowed and the child was conceived after the death of her husband
- the mother is married but one of the *exceptions* outlined above under *legitimate births* applies

Determining the status of a child as legitimate or as illegitimate can be very confusing. It is suggested that whenever you are in doubt, you contact the state registrar of vital records and statistics for advice, telephone number 617-727-2838.

item 7 father - birthplace: The name of the city or town, not a village or subsection of a municipality, should be entered. Include the name of the state if born in the United States, and the name of the country if born outside the United States.

item 8 father - age at time of this birth: This should be the age of the father at his last birthday.

item 9 father - occupation: This should be the specific kind of work the father has done most of his working life, *not* the place of employment.

item 10 mother - full name - first, middle, maiden, last: Check the complete name of the mother at the time of the birth. The instances in which the last name may not appear under this item are the cases of a birth to an unmarried mother, to one who has been divorced and resumed her maiden name, or to one who has retained her maiden name; note this in the left hand margin of Form R-3.

If the mother's maiden name is the same as her last name, it should be entered twice. However, if it is not entered, you may accept the Form R-3 as it is.

item 11 mother - birthplace: See item 7.

item 12 mother - age at time of this birth: See item 8.

item 13 mother - residence: This should be the complete present and residential address of the mother. This should *not* be her mailing address, such as R.F.D. #2, P.O. Box 32. The mailing address will appear under item 15 if it is different from the residential address. The mother's residence is the place where she has set up housekeeping, and where she usually sleeps. This is not necesarily the same as her "home state," "voting address," "legal residence." Do not enter a temporary residence such as one used during a visit, business trip, or vacation. Residence for a short time at the home of a relative, friend, or home for unwed mothers for the purpose of awaiting the birth of a child is considered to be temporary and should not be entered. Place of residence during a tour of military duty or during attendance at college is considered a permanent residence and may be entered.

item 14 attendant's certification: Be sure that the attendant has signed the certificate since the record is invalid without such a signature. The name of the physician or other attendant and his or her mailing address should be typed or printed.

item 15 informant's certificate: This item must be completed and signed since it certifies the accuracy and validity of the information appearing on record. The mother is the person who should review the record. If she finds it to be complete and accurate, she should sign it. If she is not physically able to do so, or if she cannot read or write, the father should sign. If neither is able to sign, the signature of some other person, preferably a relative, will be acceptable. [46:3A] If the mailing address is different from the mother's residence (item 13), the mailing address should be entered under item 15.

APPENDIX B

REVIEWING STANDARD CERTIFICATE OF DEATH

I. PROPER ENTRIES TO BE SUBMITTED BY:

A. PHYSICIAN OR MEDICAL OFFICER

The information to be entered on Form R-301R by the *physician or hospital medical officer* is as follows: [Numbers below refer to item numbers on the certificate]

On the back of the form:

1r decedent - name: first, middle, last: This should be the full name of the deceased at the time of death.

2r sex: This should be either male or female.

3r date of death: This should be the month, day, and year and should be the full or abbreviated name of the month. For example, February or Feb. 4, 1980, not 2/4/80.

4r place of death: This should be the city or town of death and the name of the hospital if death occurred in a hospital. If death occurred elsewhere, the street and number should be entered.

On the front of the form:

The *physician* should complete items 20 through 24f relating to the cause or causes of death.

20 immediate causes: If there is only one direct or immediate cause of death, only item 20a will be filled in. If there was a disease, injury, or complication which gave rise to the direct or immediate cause of death, items 20b and c may be filled in also. For each cause entered, there should also be an entry under "interval between onset and death." In some cases this entry may be "unknown," but the space should not be left blank.

The cause or causes of death must be printed or typed on the certificate. [46:9]

Part II. other significant conditions: If there was any other important disease or condition present at the time of death which may have contributed to death but which was not related to the immediate cause of death, it should be entered on this line.

21 autopsy: The physician should indicate whether or not an autopsy was performed.

22. was case referred to medical examiner: The physician should indicate whether or not the case was referred to the medical examiner. See page 57 for cases which must be referred to the medical examiner. If the medical examiner waived jurisdiction, the physician should enter the information required under items 23 through 24f.

25 The physician or hospital medical officer should fill in all spaces under item 25.

25a signature and title: Be sure that the physician or medical officer signed the certificate.

25b date signed: This should be the month, day, and year that the certificate was signed by the physician, and should be the full or abbreviated name of the month. (see date of death)

25c hour of death: This should include the hour and minutes, such as 7:45 A.M., 4:20 P.M.

25d name of attending physician if other than certifier: If the certifying physician was not the usual attending physician of the deceased, the attending physician's name should be typed or printed. For example, an entry would be made in 25d for those cases in which the deceased's attending physician was away and another physician was covering his practice for him.

27 name and address of certifying physician or medical officer: The name and address of the physician should be *printed* or *typed*.

B. MEDICAL EXAMINER

The medical examiner should fill out items 1r through 4r on the back of the form in the same manner as a physician or hospital medical officer. (see page 163) In some cases, the body will not have been identified and the certificate of death will not contain the name of the deceased. If the body is later identified, a second certificate should be completed and given to the clerk in the town where the body was found. [38:15] In addition, he should fill out items 20 through 24f on the front of the form. Items 20a, b, and c, Part II and item 21 would be completed in the same manner as by a physician. (see page 163) Note: the cause(s) of death must be printed or typed on the certificate. [46:9]

22 was case referred to med. exam.: "Yes" would be entered.

23 acc., suicide, hom., undet. or pending invest.: This item would be filled in specifying one of the choices listed. If undet. (undetermined) is entered, the medical examiner may have entered instead of a cause of death "cause of death not determined by autopsy and toxicological examination," or some other words to indicate that it was impossible to determine the cause of death.

In some cases, "pending investigation" will be entered. If so, the cause(s) of death may not have been entered under items 20a, b, or c. Following his investigation and determination of the cause(s) of death, the medical examiner should make out a new certificate of death completing the cause(s) of death and related information, items 20 through 24. He should date and sign the new certificate under item 26.

If the medical examiner furnishes the information on the causes of death in letter form, it may be accepted. However, you might want to suggest to the medical examiner that he use the standard form.

24a through 24f: In those cases in which an accidental injury occurred, the medical examiner would specify acc. (accident) under item 23, and enter the required information in the following items 24a through 24f.

26a through 26c: These items should be filled in in the same manner as physicians under 25a through 25c. (see page 164)

26d pronounced dead: The month, day, and year when the medical examiner pronounced death should be entered.

26e pronounced dead: The time in hours and minutes when the medical examiner pronounced death should be entered.

27 name and address of certifier: The name and address of the medical examiner should be *printed* or *typed*.

C. UNDERTAKER OR FUNERAL DIRECTOR

The information required from the undertaker appears on the certificate of death under items 1 through 19c on the front of the form. The physician will have entered the information required in items 1 through 4d, except item 4b -- county of death -- on the back of the form and the undertaker should copy this information in the appropriate spaces on the front. (see page 166 for details concerning this information)

If the physician has entered the name of the deceased as John Jones in item 1r on the back of the form, and the undertaker has entered the name as John Michael Jones, Jr. in item 1 on the front of the form, the certificate may be accepted. However, a difference in names such as John Jones on the back of the form and Frank Jones on the front of the form, will make the certificate unacceptable as you cannot be sure that the physician and the undertaker are referring to the same individual. The undertaker should contact the physician to correct the problem.

If the physician has entered Hunt as the name of the hospital in item 4r on the back of the form, and the undertaker has entered Hunt Memorial Hospital in item 4c on the front of the form, the certificate may be accepted.

4b county of death: This should be the county in which the death occurred.

4c hospital or other institution: The name of the hospital or other institution should be entered if the death occurred in or en route to a hospital or institution. If the death occurred elsewhere, the house number and street of the place where death occurred should be entered.

4d D.O.A. (yes or no): If the decedent was pronounced dead on arrival at a hospital, "yes" should be entered. Otherwise, "no" should be entered.

5 race: This should be one of the races specified on the form. If the deceased was of "mixed race," this should be both races or national origin.

6a age - last birthday: This should be the age of the deceased at his or her last birthday. If the deceased was under one year of age, this should be blank.

6b under one year - months, days: This should be the age in months or days at the time of death. If between 1 and 11 months inclusive, enter the number of months completed. If less than one month, enter the days. If over one year or under one day, this item should be left blank.

6c under one day - hours, minutes: This should be the number of hours or minutes the infant lived. If between 1 and 23 hours inclusive, this should be the age in completed hours. If less than one hour old, this should be the age in minutes. If more than one day, this item should be left blank.

7 date of birth: This should be the month, day, and year the deceased was born. The full or abbreviated name of the month should be used such as February or Feb. 4, 1980, rather than 2/4/80.

8 state of birth: If the deceased was born in the U.S., the name of the state should be entered. If the deceased was not born in the U.S. the country of birth should be entered. If born in the U.S., but the state is unknown, "U.S. - unknown" should be entered. If no information is available regarding place of birth, "unknown" should be entered.

9 married, never married, widowed or divorced: One of the terms specified should be used. The term "single" should not be used. If the marital status cannot be determined, "unknown" should be entered.

10 spouse: If the deceased was married or widowed at the time of death, the name of the spouse should be entered giving the full maiden name for a wife.

11a usual occupation: The usual occupation of the deceased should be entered. This is not necessarily the last occupation. This is the kind of work the deceased did during most of his or her working life. "Retired" should not be entered.

11b kind of business or industry: The kind of business to which the usual occupation was related should be entered, not the firm or company name.

12 social security number: The deceased's social security number should be entered.

13 if U.S. war veteran, specify war: If the deceased was a U.S. war veteran the war should be specified, such as WW I, WW II, Korea, or Vietnam. In addition, the information at the top of the back of the form must also be completed.

14 residence - street and number, city or town, county, state, and zip code: The place where the deceased usually resided should be entered, not a temporary residence such as one used during a visit, business trip, or vacation. If he or she was living in an institution for a long period of time with no intent to return to a previous residence, the address of the institution should be entered and its name must also appear. Otherwise, the permanent residence should be entered.

15a father - full name: The full name of the father should be entered. The name of a foster or step father should not be entered.

15b state of birth: If the father was born in the U.S., the name of the state should be entered. If he was not born in the U.S., the name of the country of birth should be entered. If he was born in the U.S. but the state is unknown, "U.S. - unknown" should be entered. If no information is available, "unknown" should be entered.

16a mother - name: The full maiden name of the mother should be entered. The name of the foster or step mother should not be entered.

16b state of birth: See 15b for entries which should be used.

17a informant: The name and address of the informant should be entered.

17b relationship: The relationship of the informant to the deceased should be entered. The informant, in order of preference, should be the spouse, either parent, a child of the deceased, another relative, or person having knowledge of the facts.

18a type of disposition: The specific type of disposition should be entered, such as burial, cremation, entombment. If the body is to be used for scientific purposes, "Chapter 113" should be entered and the name and location of the school or institution should be entered in item 18c.

18b date of disposition: The month, day, and year of the disposition should be entered.

18c place of disposition and location: The name of the cemetery or crematory and the name of the city or town and state where the cemetery is located should be entered. If the body is to be used for scientific or educational purposes, the name of the school or institution and the name of the city and state where the institution or school is located should be entered.

19a funeral service licenses: The *name* of the funeral service licensee or the person first assuming custody of the body and who is charged with the responsibility for completing the death certificate should be entered.

19b name of facility: The name of the facility handling the body prior to burial or disposition should be entered.

19c address of facility: The complete address of the facility entered under item 19b should be entered.

In addition to completing the above items on the certificate of death, if the deceased was a veteran, the undertaker should fill out and sign an Affidavit for Disposition of Deceased Veterans. Most of the information required to be entered on the affidavit appears on the certificate of death. However, in addition, the undertaker would have to obtain the date of enlistment and date of discharge and specific information concerning the location of the grave. [114:46A] (see page 105 for sample form)

APPENDIX C

I. NOTICE OF INTENTION OF MARRIAGE (Form R-105)

A. NAMES

Under the court ruling in Secretary of the Commonwealth and others v. the City Clerk of Lowell and others [373 Mass 178], any individual has the right to use any name he or she chooses provided this is done for an honest purpose and the clerk must rely on facts supplied by the parties (except with respect to corrections of records for which documentary evidence to substantiate information is specifically required). In addition, the clerk has no general duty to investigate the facts reported to him in proper form or to resolve factual disputes.

Prior to this court case (August 4, 1977) there were many rules followed with respect to the names on the Notice of Intention of Marriage so that you may find notes on your older records such as resumed maiden name by court order, legal change of name, legally adopted--no change of name, etc.

The following is given as a guideline to help insure that the correct information is obtained and that the resulting record is accurate.

1. Present name (names of applicants)

The name of each applicant should appear in the following order:

first name, middle name or initial, surname

Either applicant may use any name he or she chooses as long as there is no intent to defraud. A divorced bride may use her maiden name as her surname or may use her previous husband's surname.

2. Surname to be used after marriage

Either applicant may choose whatever surname he or she wishes. It may be the present surname, the groom's surname, a combination of the groom's and bride's surname, or an entirely different surname. The entry of a surname to be used after marriage has no legal effect and the parties may use a different surname later if they should change their minds.

Be sure that each applicant has entered a name in this space. The use of the word "same" should be avoided as this may lead to confusion later on as you cannot be sure that "same" refers to the name directly above or the name opposite the entry.

3. Surname of parents

Ordinarily, the surname of the groom and the maiden name of the bride will agree with the surname of his or her father. However, this will not always be the case and one of the following may apply:

- The applicant may be generally known by another name or have chosen a name different from his or her father's.

- The applicant may have been adopted without a change of name. If the applicant is adopted, Chapter 207, section 27 requires that the applicant give the names of the parents by adoption. The names of the natural parents may be added if the applicant wishes.

- The applicant has had a legal change of name.

- If the names are foreign, the difference between the applicant's name and the father's surname may be a custom of the country. For example, in Spanish speaking countries, the mother's maiden name is used as the child's surname.

If the maiden name of the mother is the same as the father's surname, check with the applicant to be sure that this is correct.

If the applicant was a state ward and does not know his or her parents' names, a copy of the birth record may be available from the Division of Child Guardianship. If the applicant was born in Massachusetts, a copy of the birth record may also be available from the state registrar of vital records and statistics. If you are satisfied that the applicant cannot obtain the parents' names, you may take a deposition to that effect and accept the notice of intention (see [207:35] and page 108).

If there is no father's name given, this indicates that the applicant is of illegitimate birth and the notice of intention and the marriage certificate issued subsequently will be impounded records under Chapter 46, section 2A and not open to public inspection.

If there is no father, the applicant's surname will ordinarily agree with the mother's maiden name. If there is a difference, one of the following may apply:

- The applicant may have been regularly using his father's surname or may choose to use that name.

- The mother may have been widowed or divorced at the time of the applicant's birth.

- There may have been court action relative to the name of the mother of the applicant.

B. AGES

1. Both applicants must be at least 18 years of age at the time of filing intentions or additional requirements must be met.

If there is any doubt concerning the ages of the applicants, proof of age is required prior to issuing the Certificate of Marriage. [207:33A] Proof of age may consist of one of the following, listed in order of acceptability:

- certified copy of birth record. If a birth certificate has been presented to you and you find a difference in the spelling of a name from that given you on the intention, such a certificate may be accepted as proof provided you are certain the individual is the same as that referred to in the birth certificate. You may require a deposition under 207:35, or ask for additional evidence.
- certified copy of baptismal record
- passport
- life insurance policy
- employment certificate
- school record
- immigration record
- naturalization record
- court record

Documentary evidence of a lower grade shall not be received by the clerk unless he or she is satisfied that evidence of a higher grade is not readily available. [207:33A]

If the applicant is unable to provide proof sufficient to establish his or her age, the applicant may apply to the probate court or district court which has jurisdiction over the town in which he or she lives. Upon receipt of a certified copy of a court order, the intention may be received by the clerk. [207:25]

2. Applicant under 18 years of age

If an applicant is under 18 years of age, a court order is required *before* the intentions may be *received*. [207:24, 25] Application for a court order should be made by the underage applicant and his or her parent or guardian to the probate or district court which has jurisdiction over the town in which the applicant lives. Upon receipt of a certified copy of the court order, the clerk may receive the intentions. If an underage applicant is an out-of-state resident, he or she must comply with the requirements of both Massachusetts and of the state of which he or she is a resident. If parental consent is required in his home state, it must be obtained prior to issuing the Certificate of Marriage. Parental consent must be notarized.

TABLE OF AGE REQUIREMENTS
FOR MARRIAGE

In all states except those listed below, the minimum age for both male and female is 18 years, the same as in this commonwealth.

GEORGIA: 16 for both. A Georgia resident between 16 and 18 marrying in this commonwealth *must* have a court order.

MISSISSIPPI: 21 for both. A Mississippi resident between 18 and 21 *must* have parental consent to marry in this commonwealth.

NEBRASKA: 19 for both. A Nebraska resident between 18 and 19 *must* have parental consent to marry in this commonwealth.

PUERTO RICO: 21 for both. A Puerto Rico resident between 18 and 21 *must* have parental consent to marry in this commonwealth.

WYOMING: 19 for both. A Wyoming resident between 18 and 19 *must* have parental consent to marry in this commonwealth.

C. RESIDENCE

The terms dwell and reside are used in the sections of the General Laws governing Notices of Intention of Marriage. The applicant need not have lived in a particular city or town for any specified length of time.

The applicant should give the residential address where he is actually dwelling or residing at the time of filing the notice of intention. This should not be a mailing address, post office box, the name of a subdivision, or the name of an apartment building.

If you find that there is a difference between the address given on the intention and that on the medical certificates presented, you may require proof of residence. Such proof may be a rent receipt, automobile registration, driver's license, tax bill, etc.

Foreigners with temporary visas must give the foreign address. Those with permanent visas should give the town of residence in the United States.

D. NUMBER OF THE MARRIAGE

If the applicant has never been married or if a prior marriage has been annulled, the term *first* should be entered. No reference to an annulment should be made on the intention or on the Certificate of Marriage.

If the applicant has been previously married and widowed or divorced, the term *second* or *third*, etc. depending on the number of previous marriages should be entered.

E. WIDOWED OR DIVORCED

If the applicant's former spouse is deceased, the term *widowed* or *wid.* should be entered. A copy of the death certificate is not required.

If the applicant has been divorced, the term *divorced* or *div.* should be entered. A copy of the divorce decree is not required. However, intentions cannot be received until after a divorce has become final. Prior to October 2, 1979, the date on which Chapter 376 of the Acts of 1979 became effective, final divorce decrees were required to be presented and filed with the notice of intention. Therefore you will find divorce decrees with your older intentions.

If the applicant has been married two or more times previously, enter the terms *div. div.* or *wid. div.*, etc. as applicable.

F. OCCUPATION

Ordinarily the occupation should be the type of work the applicant does, not the firm or company for which he or she works. For example, bricklayer, secretary, attorney; not, Acme Construction Co., Jones Mfg. Co., etc. Retired applicants may enter the term retired accountant for example. Those who are unemployed may enter the term *at home, none,* or the work ordinarily done rather than the term *unemployed.* Some entry should be made in the space.

G. BIRTHPLACE

If there is a difference, birthplace given should be the city or town and state in which the applicant was actually born, rather than the place of residence of the parents at the time of birth. It should not be a subdivision or part of a city or town.

H. FATHER'S NAME (see page 169, surname of parents)

I. MOTHER'S NAME (see page 169, surname of parents)

NOTE: *The Commissioner of Public Health may require that additional information be included on the Notice of Intention of Marriage as he deems necessary.* [46:1]

II. SOLEMNIZATION OF MARRIAGES

A. WHERE AND BY WHOM MARRIAGES MAY BE SOLEMNIZED [207:38, 39]

The following are authorized to solemnize marriages any place within the commonwealth: [207:38]

- a minister of the gospel who resides in the commonwealth
- a nonresident minister who is the pastor of a church or denomination duly established in the commonwealth and who is recognized by his church as duly ordained and in good standing, including ordained deacons of the Methodist Church or of the Roman Catholic Church. For example, a minister whose residence is out-of-state but who is the regular minister of a church located in Massachusetts is authorized to solemnize marriages
- a duly ordained rabbi of the Jewish faith who resides in the commonwealth
- a resident or nonresident chaplain serving the armed forces in the commonwealth if one party to the marriage is a member of the armed forces [executive order #13, June 30, 1951)

In addition, marriages may be solemnized any place within the commonwealth:

- in a regular or special meeting for worship conducted by a Friends or Quaker Monthly Meeting
- solemnized and witnessed by a Spiritual Assembly of the Bahai's
- by a leader of an Ethical Culture Society duly established in the commonwealth and who resides in the commonwealth
- by an Imam of the Orthodox Islamic Religion
- according to the usage of any other church or religious organization which has filed in the office of the state secretary information relating to persons recognized or licensed to solemnize marriages and relating to the usages of such organizations [207:38]
- also, the state secretary may authorize the solemnization of a specific marriage anywhere in the commonwealth by a nonresident minister, rabbi, authorized representative of a Spiritual Assembly of the Bahai's, or leader of an Ethical Culture Society, subject to such conditions as the state secretary may determine. [207:39] Application forms (5N-Form M.P.) are available from the Division of

Notaries Public and Commissions of the State Secretary's Office, 727-2836. If you have a few of these forms on hand, you will be able to assist applicants who are planning to have an out-of-state minister solemnize their marriage. (see sample form, page 177)

The following are authorized to solemnize marriages in specific places within the commonwealth:

- A justice of the peace designated by the governor under 207:39 to solemnize marriages, in the county in which he resides. [Chapter 521 of the Acts of 1981]

- A justice of the peace, if he is also a city or town clerk or assistant clerk, in the city or town in which he holds office. [207:38] He may not solemnize marriages in other cities or towns in the county in which he resides unless he has also been specifically designated under 207:39.

- A justice of the peace, if he is also a clerk or assistant clerk of court, in the city or town where the court is authorized to be held. [207:38] He may not solemnize marriages in other cities or towns in the county in which he resides unless he has also been specifically designated under 207:39.

- Clerks who are justices of the peace (paragraphs 2 and 3 above) who have also been specifically designated under 207:39 are authorized to solemnize marriages in the county in which they reside.

- A new minister not yet ordained but duly voted as minister of a church by its membership, *may* be authorized to solemnize marriages. However, it is suggested that you advise the minister or the applicants to check with the Division of Notaries Public and Commissions for confirmation or specific authorization which may be necessary prior to the marriage.

NOTE: *Witnesses to the marriage, other than the person who is authorized to solemnize it, are not required under the General Laws. However, witnesses are required under the rules of some religious organizations.*

MICHAEL JOSEPH CONNOLLY
SECRETARY OF STATE

The Commonwealth of Massachusetts

Department of the State Secretary
State House — Boston 02133

TO NON-RESIDENT CLERGY:

Pursuant to the provisions of M.G.L. Chapter, 207. Section 39, enclosed is a petition for authority to solemnize a marriage in the Commonwealth of Massachusetts

Upon receipt by this office of the COMPLETED petition SIGNED by the officiating clergyperson, the Certificate of Authority will be mailed to the clergyperson's residence, unless otherwise directed.

Very truly yours,

Michael Joseph Connolly

MICHAEL JOSEPH CONNOLLY
Secretary of State

MJC/maf

The Commonwealth of Massachusetts

TO: HIS HONOR, THE SECRETARY OF STATE-

I hereby petition for authority to solemnize a marriage within the Commonwealth of Massachusetts. If application conforms with G.L. Chapter 207, Section 39, please issue a certification of authorization.

CLERGY

Full Name _____

Place of Residence _____
Street City/Town State Zip

When and Where Ordained _____

Denomination _____

Date of Proposed Marriage _____

City/Town Where Marriage is to Take Place _____

BRIDE

Full Name _____

Place of Residence _____
Street City/Town State Zip

GROOM

Full Name _____

Place of Residence _____
Street City/Town State Zip

A true statement, made under the penalties of perjury.

Signature of Clergy _____

MAIL COMPLETED APPLICATION TO:

OFFICE OF THE STATE SECRETARY
DIVISION OF PUBLIC RECORDS
ROOM 1701
ONE ASHBURTON PLACE
BOSTON, MASSACHUSETTS 02108

CHART FOR DETERMINING THE EXPIRATION DATE OF A MARRIAGE LICENSE TO BE ENTERED IN LEFT HAND MARGIN ON CERTIFICATE OF MARRIAGE (R-101)

NOTE: In the event of a leap year, for intentions filed between January 1st and February 29th, expiration date would be one day earlier than listed on chart.

License not to be issued less than three days after filing unless court waiver is presented

INTENTION FILED ON JANUARY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
	March																														Apr
Not Valid After	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1
INTENTION FILED ON FEBRUARY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28			
	April																														
Not Valid After	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29			
INTENTION FILED ON MARCH	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
	Apr	May																													
Not Valid After	30	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
INTENTION FILED ON APRIL	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
	May	June																													
Not Valid After	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	
INTENTION FILED ON MAY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
	Jun	July																													
Not Valid After	30	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
INTENTION FILED ON JUNE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
	Jul	Aug																													
Not Valid After	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	
INTENTION FILED ON JULY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
	Aug		September																												
Not Valid After	30	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
INTENTION FILED ON AUGUST	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
	Sep	October																													
Not Valid After	30	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
INTENTION FILED ON SEPTEMBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
	Oct	November																													
Not Valid After	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	
INTENTION FILED ON OCTOBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
	Nov	December																													
Not Valid After	30	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
INTENTION FILED ON NOVEMBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
	Dec	January																													
Not Valid After	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	
INTENTION FILED ON DECEMBER	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
	Jan		February																												Mar
Not Valid After	30	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	1

INDEX

INDEX

Abstract of

- birth record, 37
- death record, 79
- marriage record, 135

Adding information to

- birth record, 22
- death record, 67
- marriage record, 122

Adopted child

- alien, 16
- amending record of, 25
- certified decree of, 16
- establishing birth record for, 15,16

Affidavit required for

- amending record of adopted child, 25
- amending birth record, 22,24-29
- amending death record, 67,68,70
- amending marriage record, 122,124
- death occurring out-of-state, 61,62
- delayed record of marriage, 119-121
- delayed return of birth, 18-20
- delayed return of death, 66
- establishing birth record of foundling, 10
- establishing own birth record, 19
- filing notice of intention of marriage, 107,109
- filing out-of-state birth record, 14
- filing out-of-state death record, 61
- filing out-of-state marriage, 117
- intention of marriage, party unable to appear, 109
- recording birth record of adopted child, 16

Affidavit and Correction of a Birth Record, 21-29

- for adopted child, 25,26
- affidavit required for, 22
- completing for recording, 28,29
- to correct clerical error, 21
- to correct or supplement information, 21
- documentary evidence required for, 27-28
- fee for, 29
- filed only in town of birth, 21
- filing of, 33
- is impounded record, 31
- for legal change of name, 26
- to legitimize illegitimate child, 26-28
- record book for, 30
- to reflect facts at time of birth, 21

Affidavit and Correction of a Death Record, 67-70

- affidavit required for, 67,70
- completing for recording, 69,70
- to correct clerical error, 67
- to correct or supplement information, 67
- documentary evidence required for, 67-70
- fee for, 70
- filed only in town of death, 67
- filing of, 71
- is impounded record, 72
- record book for, 71
- to reflect facts at time of death, 67

Affidavit and Correction of a Marriage Record, 122-125

- affidavit required for, 122,124
- completing for recording, 124
- to correct clerical error, 122
- to correct or supplement information, 122
- documentary evidence required for, 123,124
- fee for, 125
- filing of, 127
- place of filing for, 122
- record book, 127
- to reflect facts at time of marriage, 122

Agent for Board of Health

clerk may be designated, 60
to issue burial permits, 80

Aircraft

birth on, 10

Amending Records of

birth, 21-29
death, 67-70
marriage, 122-125

Annulment of Marriage

recording of, 128

Births

affidavit and correction of, 21-29
on aircraft, 10
certificate of, 7-17
certified copies of, 35-38
delayed return of, 17-20
establishing own record of, 19
at home 10,18
in hospital, 8,19
impounded records of, 30,31
out-of-state, 14,15
parents' residence at time of, 13
physician in attendance, 8
supplemental report of, 12
town of, 11
unattended, 8,10
on vessels, 9

Board of Health

clerk as agent for, 60
to issue burial permits, 80
to receive information, 35,58,82

Bodies

from out of state, 83
removal of, 80,81
unidentified, 164

Books of Record for

births, 28,30,31
deaths, 70,72
marriages, 126-129

Burial of

ashes, permit required for, 85
ashes, medical certificate required for, 85
body, certificate required for, 84
servicemen, 65
veterans, 56,60,76,77,82,83

Burial or Removal Permit, 80-88

from agent of board of health, 60,80
from board of health, 80
burial of ashes requires a, 85
burial of body requires a, 84
from cemetery superintendent, 83
certificate of death required for, 81
completion of, 85-88
for cremation, 82,84
for exhuming or moving a body, 88
numbering of, 85
for original interment or body removed, 81
for out-of-state body, 83,88
refusal to issue, 60,81
from town clerk, 80
for veterans, 82,83

Cemetery Superintendent to

endorse burial permit, 84
issue burial permits, 83
record grave locations, 84

Certificate

of adoption, 25
of birth, see certificate of live birth
for cremation, 82
of death, see certificate of death
of marriage, see certificate of marriage
from medical examiner, 164
reproduction of by unauthorized person, 38,80,136

Certificate of Adoption

to contain original information, 25
received directly from probate court, 25
required for amending birth record, 25

Certificate of Death

certified copies of, 78-80
clerk's responsibility regarding, 59-63
completing for recording, 59-63
deceased's residence for, 59,60
filing of, 70
impounded records of, 71,72
indexing of, 72,73
information to be recorded on, 55,163-168
for out-of-state deaths, 61
persons responsible for completing, 56-68
refusal to accept, 62
reporting of, 73-77
town of veteran's burial to be included on, 59

Certificate of Live Birth, 7-17

for adopted child, 16
certified copies of, 35-38
clerk's responsibility regarding, 11,12
completing for recording, 11-17
filing of, 30
impounded records of, 13,30,31,38
indexing of, 31,32
information to be recorded on, 7,157-161
out-of-state births, 14,15
persons responsible for completing, 8-10
refusal to accept, 17
reporting of, 32-35
supplemental report to, 12
town of birth for, 11
town of parents' residence for, 13

Certificate of Marriage, 113-118

certified copies of, 133-136
completing for recording, 116-118
documents required for issuance of, 115,117,118
fee for, 115,117
filing of, 126
filing out-of-state, 117,126
impounded records of, 127,128
indexing of, 129
information to be included on, 113-115
as marriage license, 113
minister to sign, 116
preparation of a, 113-115
refusal to file, 117
reporting of, 129-133
to be returned by those solemnizing marriages, 115
town clerk to record, 116
use out-of-state prohibited, 116
unused to be returned, 132,133

Certified Copies

of amended records, 32,36,37,78,134
of annulled marriages, 134
of birth records, 35-38
clerk required to furnish, 35,78,133
of death records, 78-80
fees for, 37,79,135
of impounded records, 38,80,135
of marriage records, 133-136
by photographic process, 37,74,78,130,135
of veterans records, 37,79,135
volume and page of record book to be included on, 36,79,135

Clerical Error

correcting on birth record, 21
correcting on death record, 67
correcting on marriage record, 122

Correcting Information (see amending record of) (see also clerical error)

Court Order

annuling a marriage, 128
to record births, 9,17,19
to record deaths, 62
to record out-of-state marriages, 117
for release of impounded records, 36,78,134
for underage parties to a marriage, 171,172
for waiver of waiting period for marriage, 110

Cremation of Body, 82

Deaths

affidavit and correction of, 67-70
cause of, undetermined or investigation pending, 74,164,165

Deaths (continued)
certificate of, 55-63
certified copies of, 78-80
delayed return of, 63-66
fetal, 71
at home, 58
in hospital, 56
impounded records of, 71,72
out-of-state, 61,62
of serviceman, 63
sudden, 57
town of residence for, 60,76
on vessels, 58
of veteran, 60,76
violent, 57

Delayed Record of Marriage, 118-121
completing for recording, 120,121
documentary evidence required for, 120
fee for, 121
filing of, 126
for marriage on or after February 10, 1980, 119
for marriage prior to February 10, 1980, 119
place of filing, 119,120
when to use, 118,119
within one year of marriage, 118,119

Delayed Return of Birth, 17-20
completing for recording, 20
documentary evidence required for, 18,19
establishing own birth record, 19
fee for, 30
filing of, 30
place of filing, 17
when to use, 17

Delayed Return of Death, 63-66
completing for recording, 66
documentary evidence required for, 64-66
fee for, 66
filing of, 71
place of filing, 63
when to use, 63

Deposition for
correction of a birth record, 29
correction of a death record, 67,69
correction of a marriage record, 123,124
delayed record of marriage, 121
delayed return of birth, 18
delayed return of death, 66
out-of-state birth certificates, 14,15
out-of-state child adopted by residents, 16
out-of-state deaths, 62
out-of-state death of serviceman, 63
out-of-state marriage, 118

Documentary Evidence for
correction of a birth record, 22
correction of a death record, 68,69
correction of a marriage record, 123,124
delayed record of marriage, 119,120
delayed return of birth, 18-20
delayed return of death, 64-66
filing birth record of adopted child, 16
recording out-of-state birth, 14
recording out-of-state death, 61-62
recording out-of-state marriage, 117
recording serviceman's death, 63

Exhuming Body
permit required for, 88

False Information
on birth record, 11,28
correction of, 28

Fees for
amending a birth record, 29
amending a death record, 70
amending a marriage record, 125
certified copy of birth record, 37
certified copy of death record, 79
certified copy of marriage record, 135
delayed record of marriage, 121
delayed return of birth, 20

Fees for (continued)
delayed return of death, 66
forwarding copies of records, 35,77,133
notice of intention of marriage, 11,115
recording out-of-state marriages, 117
veteran's records, 37,79,135
work permits, 37

Fetal Death, 71,80

Filing
affidavit and correction of birth, 30
affidavit and correction of death, 71
affidavit and correction of marriage, 127
annulment of marriage, 128
certificate of death, 70
certificate of live birth, 30
certificate of marriage, 126
delayed record of marriage, 126,127
delayed return of birth, 30
delayed return of death, 71
impounded records of birth, 30,31
impounded records of death, 71,72
impounded records of marriage, 127,128
notice of intention of marriage, 108,109
supplemental report of birth, 13

Forms
listing of, vii
ordering of, 34,76,131

Forwarding Records (see reporting information)

Foundlings
birth of, 10,12

Funeral Director (see undertaker)

Government Documents (federal)
for adoption of alien, 16
required for recording serviceman's death, 63

Health, Board of (see board of health)

House of Correction
superintendent to report deaths in, 58

Householders
to report births, 10
to report deaths, 58

Illegitimate Child
acquiring legitimate status, 26
adding father's name to record of, 28
documentary evidence required to legitimize, 26,27
impounded records of, 13,30,127

Impounded Records
amended records are, 31,72,128
burial permit for fetus, 71
certified copies of, 38,80,135
copies not to be forwarded to other clerks, 34
illegitimate child records are, 30,127
fetal death records are, 71,80
filing of, 30,31,70-72,126-128
not to be published in town report, 38,135
stillborn records are, 72,80
if undetermined sex entered on birth record, 31

Indexing of
birth records, 31,32
death records, 72,73
marriage records, 129

Information on
birth certificate, 7,8,157-161
burial permit, 86,87
death certificate, 55,56,163-168
notice of intention of marriage, 108,169-173
marriage certificate, 113,115
medical certificate, 112

Inspection of Records (see public records)

Intention of Marriage (see Notice of Intention of Marriage)

Introduction, 1

Justice of Peace

- authorized to solemnize marriage in specific places only, 176

Long Form (certified copies)

- births, 36
- deaths, 78
- marriages, 134

Marriage

- affidavit and correction of, 122-125
- annulment of, 128
- authorized to solemnize, 174-175
- certificate of, 113-115
- certified copies of, 133-135
- delayed record of, 118-121
- impounded records of, 127,128,135
- medical certificates for, 111-113
- notice of intention of, 107-111, 169-173
- out-of-state, 109,117,118
- petition for authority to solemnize, 176,177
- validity of, 136
- void, 137
- underage for, 171,172

Marriage Certificate (see Certificate of Marriage)

- checklist for licenses issued, 133
- expiration date of, 178
- unused, to be returned, 132

Medical Certificate

- exception to requirement of, 111
- information required on, 112
- physician to sign, 111
- out-of-country or state may be accepted, 112,113
- required prior to issuance of marriage certificate, 111
- rubella information required on, 112

Medical Examiner

- duties of, 57,164,165
- may waive jurisdiction, 57
- responsible for cremation certificate, 82,85
- responsible for certificate of death, 57
- when required to act, 57

Magistrate or Minister

- authorized to solemnize marriages, 113,174,175
- from out-of-state, 115,176,177
- petition for authority to solemnize marriage, 176,177
- returns certificate of marriage to clerk, 115

Notice of Intention of Marriage, 107-111

- applicants for, to appear together, 108
- clerk to receive, 107
- as evidence for delayed record of marriage, 118,119
- exceptions to filing in person, 109
- fee for, 111
- may be filed in any city/town, 108
- filing of, 108
- information required on, 108,169-173
- medical certificate required for, 111
- for military personnel, 109
- not to be filed for out-of-state marriage, 109
- by underage applicants, 171,172
- waiting period for issuance of certificate, 109,110
- waiver of waiting period for, 110,111

NOTARIZED AFFIDAVIT (see affidavit required)

Oath

- samples of 20,66,107,121

Ordering State Forms (see forms)

Out-of-State

- births, 14,15
- body brought to state for burial, 83

Out-of-State (continued)
death, 61,62
establishing records of marriage for Massachusetts residents married, 117
Massachusetts intention of marriage not valid, 109
Massachusetts residents to be married, 109

Penalties
for altering or forging records, 11,59,139,140
on clerks, 38,89,138
for false returns, 11,59,139
on hospital administrators, 10
on individuals, 11,59,139,140
on persons solemnizing marriages, 138,139
on physicians and medical officers, 10,11,58,139
on undertakers, 59

Pending Investigation
entered on death certificate, 74,164,165

Permanent Records
of birth, 29-32
of death, 70-72
of marriage, 108,113,125-128
preserving of, 29,70,125
public inspection of, 31,72,128

Petition for Recording
births, 17,19
deaths, 61,62
marriages, 117

Photographic Copies (see certified copies)
conditions for use of, in reporting, 37,74,130

Physician or Medical Officer
duties of, 8,56,57,111,112,163, 164
penalties on, 10,11,58,139

Public Records
birth records are, 31
death records are, 72
marriage records are, 128

Record Book
annulment of marriage to be noted in, 128
certified copies of records to list volumes and page of, 36,79,135
impounded records may be included in, 31,72,128
used for recording births, 28,30,31
used for recording deaths, 70-73
used for recording marriages, 122, 125-128

Recording
births, 11-18,20,28,29
deaths, 59-63,66,69,70
marriages, 116-118,120,121,124,125

Refusal by Clerk to
issue burial permit, 81
issue certificate of marriage, 108
record births, 9,17,19
record out-of-state deaths, 62
record out-of-state marriage record, 117

Registered Number of
amended records, 28,69,125
certificate of birth, 13,14,16,33,34
certificate of death, 61,70
certificate of marriage, 116
delayed returns, 20,66,71,121

Removal Permit (see burial permit)

Reporting Information to
board of health, 35
city or town clerks, 12,20,21,29,34, 66,70,73-76,129-133
registrar of voters, 77
state registrar of vital statistics, 12,20,29,32-34,66,70,73-76,129-133

Reproducing Records (see photographic copies) (see also certified copies)
by unauthorized persons prohibited, 38,80,136

Returns (see reporting information)

Rubella
certificate for female marriage applicant, 112

Sample Forms (see forms)

Serological Test
for marriage may be performed out-of-state, 112
physician signature required on, 111
required prior to marriage, 112
timing for, 111

Servicemen
filing Notice of Intention of Marriage, 109
recording out-of-state death of, 63

Special Notices
of death, 58

Supplemental Report
of birth, 12,13

Transexuals
amending birth certificate of, 24

Undertaker
to enter information on certificate of death, 58
to obtain burial permit, 80,81
penalties on, 59

Unidentified Bodies, 164-B

Validity of Marriage, 136,137

Vessels
births on, 9
deaths on, 58

Veterans
affidavit for disposition of body of, 77,82,83,168
burial of, 60
burial permit for, 83,84
buried in another town, 76,77
certified copies of records relating to, 37,79,135
information required on death certificate of, 56
notification to veterans' graves officer, 77,83

Veterans Graves Officer (see veterans)

Violent Deaths, 57,164

Void Marriages, 137

Waiting Period
for issuance of marriage certificate, 109
waiver of by court, 110
waiver of, in emergencies, 110

Work Permits
birth record for, 37